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S P E C I A L

R E P O R T

FROM THE

SELECT COMMITTEE

ON THE

MEDICAL ACT (1858) AMENDMENT
(No. 3) BILL;

TOGETHER WITH THE

PROCEEDINGS OF THE COMMITTEE,
M I N U T E S O F E V I D E N C E,
AND APPENDIX.

12 March

Ordered, by The House of Commons, to be Printed,
12 March 1880.

Ordered,—[*Thursday, 12th February 1880*]:—THAT the MEDICAL ACT (1858) AMENDMENT (No. 3) BILL be read a second time, and committed to a Select Committee.

THAT the MEDICAL ACT (1858) AMENDMENT (No. 2) BILL be read a second time, and committed to the Select Committee on Medical Act (1858) Amendment (No. 3) Bill.

Ordered,—[*Thursday, 19th February 1880*]:—THAT the Medical Act (1858) Amendment Bill be referred to the Committee.

THAT the Medical Appointments Qualification Bill be referred to the Committee.

THAT the Committee do consist of Seventeen Members.

Committee nominated of—

Mr. William Edward Forster.	Mr. Mitchell Henry.
Dr. Cameron.	Mr. Arthur Mills.
Mr. Dalrymple.	Dr. Lyon Playfair.
Mr. Errington.	Mr. Serjeant Simon.
Mr. Goldney.	Mr. David Plunket.
Mr. Heygate.	Mr. Wheelhouse.
Lord George Hamilton.	Mr. John Maitland.
Sir Trevor Lawrence.	Mr. Lowe.
Dr. Lush.	

THAT the Committee have power to send for Persons, Papers, and Records.

THAT Five be the Quorum of the Committee.

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S P E C I A L R E P O R T.

THE SELECT COMMITTEE to whom the MEDICAL ACT (1858) AMENDMENT (No. 3) BILL, the MEDICAL ACT (1858) AMENDMENT (No. 2) BILL, the MEDICAL ACT (1858) AMENDMENT BILL, and the MEDICAL APPOINTMENTS QUALIFICATIONS BILLS were referred;—
HAVE agreed to the following SPECIAL REPORT:—

YOUR COMMITTEE are of opinion, that, in consequence of the approaching Dissolution of this present Parliament, it is not possible to complete the Evidence which bears on the Bills referred to them. That the Bills be, therefore, reported to the House without Amendment, together with the Minutes of Evidence taken before them, and an Appendix.

12 *March* 1880.

PROCEEDINGS OF THE COMMITTEE.

Monday, 1st March 1880.

MEMBERS PRESENT:

Mr. Wheelhouse.
Mr. Arthur Mills.
Mr. Lowe.

Sir Trevor Lawrence.
Dr. Cameron.
Lord George Hamilton.

Lord GEORGE HAMILTON was called to the Chair.

The Committee deliberated.

[Adjourned till Monday next, at Twelve o'clock.]

Monday, 8th March 1880.

MEMBERS PRESENT:

Mr. William Edward Forster.
Lord George Hamilton.
Mr. Wheelhouse.
Mr. Arthur Mills.
Mr. Errington.
Mr. Mitchell Henry.

Dr. Cameron.
Mr. Lowe.
Dr. Lyon Playfair.
Mr. David Plunket.
Mr. Serjeant Simon.

Mr. WILLIAM EDWARD FORSTER was called to the Chair.

Dr. J. Struthers, M.D., Dr. W. T. Gaidner, M.D., and Mr. W. J. Clarke Miller, were severally examined.

[Adjourned till Friday next, at Twelve o'clock.]

Friday, 12th March 1880.

MEMBERS PRESENT:

Mr. WILLIAM EDWARD FORSTER in the Chair.

Lord George Hamilton.
Sir Trevor Lawrence.
Mr. Mitchell Henry.
Dr. Lyon Playfair.

Mr. Dalrymple.
Mr. Errington.
Mr. Lowe.
Dr. Cameron.

SPECIAL REPORT brought up, read the first and second time, and *agreed to*.

Ordered,—To Report the Medical Act (1858) Amendment (No. 3) Bill, without Amendment, to the House.

Ordered,—To Report the Medical Act (1858) Amendment (No. 2) Bill, without Amendment, to the House.

Ordered,—To Report the Medical Act (1858) Amendment Bill, without Amendment, to the House.

Ordered,—To Report the Medical Appointments Qualifications Bill, without Amendment, to the House.

Ordered,—That the Special Report, together with the Minutes of Evidence, and an Appendix, be reported to the House.

EXPENSES OF WITNESSES.

NAME of WITNESS.	PROFESSION or CONDITION.	From whence Summoned.	Number of Days Absent from Home under Orders of Committee.	Allowance during Absence from Home.	Expenses of Journey to London and back.	TOTAL Expenses allowed to Witness.
				£. s. d.	£. s. d.	£. s. d.
Dr. J. Struthers - -	Doctor of Medicine -	Aberdeen -	4	12 12 -	6 18 6	19 10 6
Dr. W. J. Gairdner -	Doctor of Medicine -	Glasgow -	3	9 9 -	5 15 -	15 4 -
				TOTAL - - - £.		34 14 6

LIST OF WITNESSES.

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MINUTES OF EVIDENCE.

Monday, 8th March 1880.

MEMBERS PRESENT:

Dr. Cameron.
Mr. Errington.
Mr. William Edward Forster.
Lord George Hamilton.
Mr. Mitchell Henry.

Mr. Lowe.
Mr. Arthur Mills.
Dr. Lyon Playfair.
Mr. Serjeant Simon.
Mr. Wheelhouse.

THE RIGHT HONOURABLE WILLIAM EDWARD FORSTER, IN THE CHAIR.

Professor JOHN STRUTHERS, called in; and Examined.

Chairman.

1. You are Professor of Anatomy in the University of Aberdeen, are you not?—Yes.
2. And Doctor of Medicine of the Edinburgh University?—Yes.
3. And a Fellow of the Royal College of Surgeons of Edinburgh?—Yes.
4. How long have you been a teacher of anatomy in either Edinburgh or Aberdeen?—For over 30 years, half in Edinburgh and the latter half in Aberdeen.
5. You have been for nearly the same period Examiner for Corporation and University Diplomas and Degrees?—For nearly the same period I have been engaged in examinations for Corporation Diplomas and University Degrees.
6. And you have acted as visitor of examinations for the Medical Council?—Yes, on two occasions.
7. And has that induced you to attend to the different efforts of medical legislation for the last quarter of a century?—I have, unfortunately, been deeply engaged in these matters.
8. The first question upon which we want your opinion is the proposal for a conjoint examination for each of the three kingdoms; you are aware what are supposed by the advocates of this scheme to be the evils of the present system; have you any remark to make upon that?—It appears to me that the evils of the present system are two in number: first of all, there is a want of security to the public from the half qualifications given by the corporations admitting to the Register. Secondly, the inconvenience to the students in having to go to two corporations to obtain a complete qualification. These are the two evils which I recognise as existing at present.
9. Do you consider that they apply to the

Chairman—continued.

Universities as much as to the Medical and Surgical Corporations?—I do not think that they apply to the Universities at all, but only to the Medical and Surgical Corporations.

10. Why do you think they do not apply to the Universities?—Because the Scottish Universities confer a complete qualification both in medicine and surgery; and the student is not put to the inconvenience of having to go to different bodies. I think that the evils admit of being remedied without touching the Universities, by simply requiring in the first place a complete qualification before registration; that will remedy the evil of registration on a half qualification. Secondly, the inconvenience to the student may be remedied, I think, by a voluntary joint examination by the corporations of each division of the kingdom, without interference with the Universities at all. These are the two remedies that I would suggest.

11. How many medical undergraduates have you at Aberdeen?—I am coming at a subsequent part of my evidence to that; I have the facts relating to it in a table; the number of our students of medicine last year was 376.

12. With regard to their course of study, you would state, would you not, that it is longer than the proposed English joint scheme?—It is longer than that of the proposed English joint scheme.

13. Is it longer than that of the corporations?—It is also longer than that of the corporations.

14. With regard to the subjects of study, are there as many subjects?—They are more numerous; but, perhaps, you will allow me to point out with reference to the longer course of study, a point which I think of importance. The course required for the universities is four years

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years of real study, including four winter sessions. The corporations and the English joint scheme nominally require four years, but they really do not. It is three winters and two summers which is their real course of study. One of the years may be spent as an apprentice, without having commenced medical study as we understand it. We hold that medical study commences at a medical school; that it is not worthy of the name of medical study until it commences at a medical school by dissecting the human body. The corporation students may be engaged in the country as apprentices. After they pass their preliminary examination, they are not necessarily at a medical school; or, again, in the fourth year, they may go away to the country, but they are not required to devote four years to what we, in Scotland, call medical study.

15. You consider that four years of absolute study should be spent upon nothing but education?—Yes.

16. What is the length of your terms?—We have winter sessions and summer sessions; five months in winter and three months in summer, followed, after both terms, by some weeks occupied with the examinations for the degrees. I may mention that most of our students study in the summer also; three-fourths are there in the summer session as well as in the winter.

17. With regard to the subjects of study; what do you say about them?—The subjects of study are more extensive in the Scotch Universities than in the corporations; we have, in addition, the sciences of Botany and Zoology; our examinations in chemistry, anatomy, and physiology are higher, and in our preliminary examination we have a higher standard.

18. I do not ask you so many questions upon this subject, because we have already had a pretty full description of the Edinburgh system, and I suppose yours in Aberdeen is similar?—Yes, I quite concur in what Professor Turner said upon the subject of our scientific studies.

19. With regard to the examinations for degrees, do you consider your examination a very searching one?—We consider the examination a very searching one, and the teaching also more thorough than in the corporations. We attach more importance to our system of teaching even than our examinations. It is a character of our Scotch Universities that the professors are devoted to their work. If you will take anatomy and physiology, the fundamental sciences of medicine, in the English schools, the teachers of those departments are not devoted, with a few exceptions, to teaching anatomy or physiology, whereas in Scotland all our professors of anatomy and all the professors of physiology devote themselves to teaching. The result of that is that there is a much more thorough education given in the fundamental sciences in the Scotch Universities than there is in the London schools. Anatomy and physiology are regarded in London and the English schools generally as a stepping-stone to practice. During my experience as a teacher of anatomy the teachers in the various English schools have changed a number of times; they move on, and are not devoted to the teaching of their departments. Then again, take medicine and surgery; in London the lecturers on medicine and surgery give up their professorships; when they become busy in practice they then throw them

Chairman—continued.

up. Now in the Scotch Universities we never do that. If you will allow me just to take for illustration the case of one of the best men in the profession that you have, Sir James Paget, who has been before this Committee, he has thrown up his professorship. In Scotland Mr. Syme, the great surgeon of my student days, did not do so, and Professor Spence, the eminent surgeon in Edinburgh, teaches; he does not throw up his professorship.

20. Edinburgh has lost its great man, Mr. Lister, has it not?—Mr. Lister has come up to London. There are no better surgeons than in Edinburgh. Allow me to take the case of the physicians as another illustration; take Sir William Gull; in England Sir William Gull has gone off into practice, and has given up teaching; in Scotland take the case of Professor Gairdner, of Glasgow, who, I may say, is the chief among the physicians of Scotland, he has not given up teaching; the same with others, they retain their professorships, and the result of that is that the teaching is much more thorough in the Scotch Universities, even in medicine and surgery, than it is in the schools of London. It is a weak point in the London and English provincial schools, and does not admit of remedy through the Medical Council. I have observed that previous witnesses speak a great deal about what the Medical Council may do by inspecting medical schools. I do not know what they mean; it is impossible to remedy the weak points of the London and other English schools through the Medical Council. The only thing that could remedy the weaknesses of medical education in England would be an Act of Parliament entirely changing the institutions and converting them into institutions like the Scotch Universities.

21. With regard to your examiners, they are several of them outside examiners, are they not?—Yes, there are outside examiners.

22. When I was at Aberdeen, when we had to appoint examiners, I do not know whether it was the actual rule, but it was quite the custom that it should be outside men, was it not?—Yes; but will you allow me to explain that before the Act of 1858 we had no examiners at all except professors, and that the Commission under that Act introduced three outside examiners in each university, but we have gone on increasing the number of them; we have six outside examiners in Aberdeen, and they are all brought from other places, and those gentlemen sit and examine with the professors, and with equal power. It is my very ideal of an examining board that it should be composed partly of the teachers and partly of those to whom the candidates are personally unknown. A board composed entirely of either I would consider objectionable.

23. Then in that way you have a good deal of the advantages of a joint board?—Virtually there is a joint board already in each Scotch University; there is the teacher along with a man equally powerful, namely, the outside examiner; we have undergone great changes since 1858.

24. Is it the case that you have securities in consequence of the Act of 1858 that the Universities cannot lower their standard?—We have securities under that Act and the Commissioners Ordinances under the Act; we must apply to the Privy Council for permission to make any change; the Privy Council then consult the other Universities, so that no one University can
act

Chairman—continued.

act without the others having their influence. If one University were to propose to lower its standard, the other Universities would object and stop it.

25. Therefore I understand you to say that you do not consider the joint board system is called for as far as the Universities are concerned?—Most certainly not. Would you allow me just to state with regard to my own University in particular, that there appears to be great misapprehension. It seems that there is an impression that St. Andrew's and Aberdeen are institutions of the same kind; St. Andrew's has no medical school; it is doing very good work as a small University, in arts, in divinity, and in the general sciences, but it is not a medical school. Aberdeen, before the Universities of Scotland Act, 1858, had two Colleges, but the medical arrangements were not on a satisfactory footing; I was not there at that time, but the Act entirely changed it, and organised a complete medical faculty.

26. You mean at the time when there were two Universities?—Yes. In Aberdeen, now, we have dissecting and microscope rooms, physiological, chemical, pharmaceutical, and toxicological laboratories; anatomical, pathological, obstetrical, botanical, and natural history museums; and, for practice, we have the Royal Infirmary, the Sick Children's Hospital, the General Dispensary and Lying-in and Vaccine Institution, the Eye Dispensary, and the Royal Lunatic Asylum. We have now a large and flourishing medical school. Within my personal knowledge the numbers have more than doubled; indeed, my beginners are nearly three times as many as they were at first. About a third of our students of medicine are English or colonial, and we have students from nearly all parts of the world. In my own department I have had to get a new lecture-room, have fitted up a histological laboratory, and have added and stocked a large new anatomical museum; the dissecting-room is about to be enlarged, and when that is done I may be allowed to say that the anatomical establishment of Aberdeen will, I believe, be superior to any known to me in this country. Then as regards the carefulness of our teaching there, I should like to say that we specially superintend the education of the individual student. Our students are hardworking, our system, indeed, makes them so; no student can be idle in Aberdeen without our at once noticing it and pulling him up. I have observed various references by previous witnesses to the carelessness of attendance at lectures, as for example some statements were made that students might have certificates without ever attending; we know of no such thing in the Scotch Universities. I know all my students individually. We call a roll every day, and in order to show the Committee how entirely incorrect those allegations are with regard to the Scotch Universities, I have brought my class register here with me (*producing the same*), and of the over 200 names on this book I could at once mention, in the case of any one the Committee may select, how often that student was present or absent at each of the 100 lectures. I could tell how many parts he dissected, and whether they were carefully dissected or not. I could tell how many class examinations he attended, and his per-centage of

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marks at the written and oral and practical examinations in the class.

27. Supposing you are right in saying that the Conjoint Board, that is to say the one-portal examination, is not wanted for Scotland on account of the Universities' standard being too low, you still, I think, would admit, would you not, that there are advantages to the general profession in having only one portal?—I am not prepared to admit that. I think, if I may be allowed to complete for a moment my statement of the Scotch Universities, it would be evident that I do not agree to that. I should like to reply to an allegation which was made before this Committee by Dr. Quain, with regard to Scotland. Dr. Quain said at Question 1485 to 1490, that Scotland passes more students than it registers, as if there was something wrong in that. A correct answer to that was given by Professor Turner, in answer to Questions Nos. 3365 and 3366, that some students registered in England, but came to Scotland afterwards for their medical education. In fact, English students come to Scotland for their education because the education is better, and our English friends do not like that. But I wish to state that at Aberdeen we register a considerably larger number than we graduate. I could supply figures for that, if it were necessary. A number cannot graduate with us who begin with us, and that may illustrate the difference between us and the corporations. Every man who comes to us is not able to take his degree. We are on a higher level than the corporations. A certain proportion of our students succeed in taking the degree, and the rest, who are not able to take their degree, gravitate to the corporations. Then with regard to the thoroughness of our examination, I should like to say that I wish distinctly to repel all the allegations with regard to inferiority or insecurity in Scotland. I know no examinations which are more careful and more searching than those in the Aberdeen University. The result is that our students are thoroughly trained and distinguish themselves afterwards. The other day one of our students was at the very top in the Indian competition; that is a thing we generally see. There is very generally an Aberdeen man either at the top in those competitions or near it.

28. Supposing you are right in your examinations being so good, where is the disadvantage in your student who has passed your thoroughly searching examination, submitting himself to an examination which would be less searching?—The general objection is interfering with a system which is already working well.

29. Do you not think, as regards the profession generally, that there would be an advantage in having a higher minimum standard of examination than there is now?—I am not quite able to say what the London minimum is. It is very difficult to say, it is so broken up; but I can speak for the minimum of the Scotch Corporations as being a very good minimum.

30. Have you taken this into account, that even supposing the whole of the Scotch medical examinations were up to a high minimum, there would be a danger of the profession being lowered by a lower minimum in the other two kingdoms?—The effect, I believe, of the joint Board system, as proposed by the Bill, would be

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to lower the standard of medical education in Scotland. I submit that my position is this: that a joint Board system is not called for in the Universities of Scotland; but I would go on to state that in the event of its being considered that there are reasons, on national grounds, for establishing a new system of licensing, the question then for us is what concessions ought the Universities to make? That is the turning point of the difficulty in which the Scottish Universities are placed.

31. Can you give us any information upon that point?—I think there has been a good deal of misunderstanding about our position in Scotland. There has been a general idea that we are opposed out and out to joint Boards. That, I may say, is quite correct in a certain sense. I observe it was stated by Mr. Simon here, that Scotland at one time was going in for a joint board, but then what kind of a joint board was it? If the Committee care, I have here the printed statement, of date July 1872, of the opinions of all the different bodies in Scotland about a joint board, and it amounted to very little. It was not a joint board at all except for the very last bit of the examination, and we were not unanimous even as to that.

32. What I would ask you to do is to give your own opinion and the opinion of your University upon the matter?—From the University point of view I would say that it depends upon what kind of joint board is proposed. There is a kind of joint board which we consider it would be our duty to do our utmost to prevent the establishment of, and that is a joint board of the following kind: one which ignored the higher education and examination of the Universities, thereby obliging university students to pass separate examinations, and which also subjected them to a heavy payment. The objections to such a system would be, first, that it would lay a serious and most uncalled-for money tax on the large body of students at the Scotch Universities; secondly; it would discourage university graduation in Scotland, and thereby tend decidedly, in my opinion, to lower the quality of medical education in Scotland. It has been maintained by various witnesses that it would not lower education in Scotland. I will show at once, as a teacher of experience, how it would lower it. It would lead to grinding. If we had a joint board system, setting up a Government licence, the result would be that you would have teachers and schools claiming to be joint board teachers, and schools giving themselves out as specially preparing for this examination, in plain terms it would lead to what we call grinding. I may mention that grinding is extinct in Scotland. I believe that in Aberdeen, and Professor Gairdner will speak for Glasgow, we have no grinders. When I went there first there were several, but we have not at present a single grinder. In London you have a good number. London is the place for grinding. The students do not care for a higher standard than that of the necessary examination. They go in for the minimum, and a system of grinding arises. That would be the result, I believe, of a joint board system in Scotland, that many students would leave the Universities and go to a class of teachers and schools of the humbler type.

33. Is there any other joint board system to

Chairman—continued.

which you think the Universities could consent? —There is a kind of joint board system which the Universities, I think, might go into, if it is considered desirable to have such a system at all. I say, if it is considered desirable. I beg to ask attention to the joint board scheme agreed on by the English corporations and Universities in March 1878 (in Section 1, and Section 3, page 7). "Every matriculated student of an English University who shall have completed the curriculum of study required by his University, and shall have passed such an examination or examinations at his University as shall comprise the subjects of the first and second examinations conducted by the Board, is eligible for admission to the third or final examination; and every candidate so admissible to examination is required to pay a fee of five guineas." That is to say, the English University student is not to be brought under the English joint scheme, except its latter part, and instead of paying 30 guineas pays five. He is to be examined only in the departments of practice. That is the arrangement made by the English Universities and corporations. Would you allow me in connection with this subject to refer also to Mr. Simon's evidence. We consider this a very important point. At Question 596, Mr. Simon says before this Committee, "A previous concession to the Universities had been made, I think I may say, with pretty general consent: namely, that a scheme for the conjoint board of any part of the United Kingdom might provide for taking into account such scientific examinations (examinations, that is to say, in chemistry, botany, natural history, general pharmacy, anatomy and physiology) as should be gone through at separate Universities. It was felt that that was a considerable concession, but was, on the whole, a fair one." And, again, Mr. Simon refers to this at Question No. 1228. I should like to mention that Lord Ripon's Bill, to which Mr. Simon referred, does not include these words. I refer to Clause 10 (2) of that Bill, as amended on Report, of date 10th May 1870. It was the intention to have introduced them in a farther stage of the Bill, but the Bill was dropped before these words could be introduced into it. Allow me now to refer to Clause 15 of the present Bill, sub-section 3, the last five words, "or have passed other examinations." I desire to point out that the only reference to this possible concession is in these last five words. There is no acknowledgment in this Bill at all of the examinations of the Universities; no provision whatever is made for them. These five words appear quite unimportant words to the ordinary observer, a sort of mousehole in a corner, but when the English Universities approach, it becomes large enough to admit them, and the English Universities are squeezed through in the English joint scheme, under these five otherwise unintelligible words, "or have passed other examinations." What we desire is, that this recognition should be introduced definitely into the Bill in words such as those which Mr. Simon has referred to. We think that national Universities are worthy of being recognised in a medical Bill.

34. What would you suggest with a view to removing that objection?—Perhaps I may be allowed to hand in a paper from Aberdeen University, which I think states this fully. I may

Chairman—continued.

may mention, just to show our consistency in the matter, that this document is dated 10 years ago, 24th May 1870, on Lord Ripon's Bill; I read it the other night at a meeting of my colleagues, and we stand entirely to it. If you will allow me to give it in, it contains our case, and also suggests a clause. Although it is 10 years old, it expresses exactly our present opinion (*delivering in the same*).

35. I understand that the clause which you think ought to be inserted, and the insertion of which would remove your objection, is this: "Candidates for admission to the examination, who are also candidates for University graduation, and have passed the examination or examinations conducted by the University, on the accessory and fundamental science of medicine, including chemistry, natural history, botany, anatomy, and physiology, shall, on their having completed the curriculum of study required for examination by the Medical Examining Board, be entitled to be admitted to the final examination of the Board on payment of a fee not exceeding 5*l.*"—That is so, as regards that point.

36. Last year we had somewhat similar statements made by two or three gentlemen from different points of view, especially from Professor Turner, of Edinburgh. If you have got the evidence before you, will you just turn to page 221, where I asked several questions bearing upon a somewhat similar proposal; I will just direct your attention to the last Question, which states his final opinion. He was asked, "Then, as I understand it, you would say that your examination, as regards the science of the system, what you may call the theory of it, should be accepted, and that there should be a conjoint practical and clinical examination?" To which he replied "Yes, that is the position." Your view would be somewhat similar to that?—Yes, we would consent (if it is reckoned of National importance to have a joint board system) to an examination in the practical branches, as in the English scheme; but as to whether that examination should be conducted merely clinically, that is a different question. Of course we would wish to limit it as much as possible, but I can in no way advocate making it a sham, or conducting it by a defective method. If it is to be an examination in medicine, surgery, and midwifery, let it be a good one. My own opinion, and that of my colleagues, is, that a mere clinical examination is not a satisfactory test of a student's knowledge. If there is to be a joint board examination at all, we have no desire to limit it to the clinical method alone; it would simply be an examination in medicine, surgery, and midwifery, including systematic as well as clinical. It has been urged that at these scientific examinations, inspectors should be present. We have no objection to as many inspectors, or as many members of the joint board being sent down to us as the joint board chooses, if they will not assess our students in any expense on that account. We have not the least objection to any number of joint board examiners coming and seeing that our examinations are up to their mark, or assisting in the examinations if they please; but we decidedly object to the students having to pay money on that account.

37. Do you wish to make any remark with regard to the Duke of Buccleuch's proposal of March 1879?—The Duke of Buccleuch's proposal of 1879.

Chairman—continued.

posals has reference to meeting the difficulties of the Scotch Universities specially. The English Universities are on a very different footing from the Scotch, they have little or nothing to lose; and it is a remarkable fact, to which I call the attention of the Committee, that in the English scheme the Universities supply no examiners whatever. It has been urged in support of a general joint board scheme that it would improve the standard of the examination to have the University element infused; but it is a most significant fact that the examiners under this English joint scheme are entirely corporation examiners, not a single examiner from the Universities, and that may tend to show what a very slender connection the English Universities have with medical education and licensing. The Scotch Universities, with their large medical schools, could not possibly consent to such a system. I need not read the proposal of the Duke of Buccleuch, as it is quoted in Professor Turner's evidence in Question 3153. The object of that proposal was twofold. One object was to avoid the disturbance of our examinations. Why should a University student, on his passing our examination in medicine, surgery, and midwifery, be obliged to undergo another examination, when the object can be secured by the joint board examiners sitting alongside of us? The other object it secures is, that the board shall have an assurance that these examinations are not below the level of those of the joint board. I think that an admirable suggestion of the Duke of Buccleuch's, and we ask that security be given for this by the insertion of such a clause in the Bill, following the clause giving security for the acceptance of the University examinations in scientific subjects, suggested under Question 34.

38. Have you any further suggestion to make upon that subject?—There was another suggestion which I would like to mention in consequence of a communication from Professor Turner, in connection with his answer under Question 3154. I believe it is Sir Robert Christison's suggestion. In the English joint scheme the board has to nominate twice the number of persons, and then the corporations are to select the examiners from those; that is the plan in the English joint scheme. Now, something of the same kind might be done for selecting those joint board examiners who are to sit with the professors. They would be selected by the University court from among twice the number nominated by the Medical Board. This is quite in accordance with Clause 16, lines 30, 31, of the Bill, and might be secured by an addition to that clause.

39. I think I understand you to take substantially the same ground as Professor Turner did, that either the Duke of Buccleuch's amendment of having a certain proportion of your examiners appointed by the boards outside, or the other suggestion of the theoretic and scientific examinations being conducted by your body, and the practical examination by the Medical Board, would, to a certain extent, remove your objection?—Yes, but both of these conditions; we would expect, first of all, that our scientific examinations would be accepted; and then, in addition to that, when you come on to examine our students in the practical branches, we would expect that the joint board examiners would come to each University and sit along with the professors

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professors there, and conduct it jointly with the professors. That is supposing a joint board to be thrust upon us. But I beg not to be understood as supporting the joint board idea; I beg it to be understood that our University has taken up this position; that if there is to be a national advantage, which however we do not see, in having a joint board, we are not going to stand in the way, provided we have security that our scientific examinations will be accepted, and also, that the proposal of the Duke of Buccleuch's will be adopted. But with our consent to these concessions we make it an absolute condition that they be secured to us by clear clauses in the Bill. We will not trust to the chances of a scheme under the tender mercies of the Medical Council, in which the corporations and the English Universities will always be in a numerical majority.

40. With regard to the fifth clause of the Bill, you have a special objection to that, have you not?—Yes, I am coming to that; but we do not think a joint board system necessary at all. We consider that if the corporations of London and Dublin will do as the Scotch corporations have done, namely, form a joint examination for their own licences, that is all that is necessary, and we consider that the London corporations putting together this scheme of theirs, and endeavouring to thrust it upon Scotland, is a very selfish proposal, and extremely wrong. Our Scotch Universities are working very well, and we do not see why because the London corporations cannot agree in their money affairs, or other affairs, this scheme should be thrust upon the Scotch Universities, which, we hold, are doing excellent work. We consider that the proposal on the part of the London corporations, if I may be allowed to speak so plainly, is a most selfish one. I am reminded of Lord Bacon's illustration of selfishness, that some people would rather see their neighbour's house burnt down than not have their eggs roasted; now the London corporations, to roast their eggs, wish to burn down the Scotch Universities.

41. Putting aside the question of the corporations, I suppose you would admit that the public, and therefore the Members of Parliament representing the public, have to consider the advantages which are alleged to be in favour of a conjoint examination, in order to prevent a very low degree being given by some of the bodies. We are well aware that that objection does not apply to the Universities, but have you considered that those who are anxious to prevent a very low qualification would find considerable grounds for adopting some final conjoint examination in each of the three kingdoms?—There are allegations of that; but I am not aware that the examinations are deficient. There is the awkwardness of three corporations, and the student going between them; and the evil of half qualifications admitting to the Register, which legislation may easily correct; but I am not aware of those allegations being correct.

42. What you suppose is, that all your examinations are high enough?—Yes, I have had a long experience of these things, and I am not aware that the examinations in this country are deficient. The inspectors of examinations from the Medical Council have not said so. I think that this cry, if I may use the word, for a joint board system, has arisen in this way: in England,

Chairman—continued.

it is owing to the London corporations working separately. The case simply of a voluntary joint examination by the London corporations for their licences has not been put to the practitioners of England as an alternative. We had no difficulty in Edinburgh in forming such a joint board. It was done 20 years ago, on the passing of the Medical Act of 1858. Dr. Andrew Wood and I acted for the College of Surgeons in making the arrangements. It was a great step, and has proved most satisfactory. I do not see why the London College of Physicians and the London College of Surgeons should not also voluntarily form a conjoint examination, which would solve the difficulty.

43. Have you any remark to make about the German Universities?—I do not wish to occupy the time of the Committee upon that, because Professor Turner has gone fully into the details (3165 to 3180). From personal knowledge I can confirm what he said of the State examination of Germany, and I would just like to say that I think the history of that examination is a warning to us. This very joint board system was tried in Germany. I attach great importance to what is done in Germany, because the Germans are a long way in advance of us educationally.

44. In medical education?—In all kinds of education. I think they are just as far in advance of us, educationally, as we are politically of them. They tried this joint board system; they drove everybody into Berlin, and the thing broke down, and the result is, that now, instead of a one-portal system, they have a 20-portal system in Germany. I know the working of it personally, because I was living at Bonn last year. I know that the State examination is virtually an examination at each University, and remarkably like the present system of the Scotch Universities. The Professors at Bonn, or any other University, conduct the examination along with three assessors; as I understand, only three outside examiners.

45. Is that under the control of the Central German Government?—The Central Government each year nominates this body; they appoint the professors, and three or a certain number of extra practitioners to sit with them in conducting the examination.

46. Do they take no security that there should not be a much lower examination in one University than in another?—They have no security except the high character of the professors in the University; they require no more.

47. Are there any examining bodies except the Universities?—None; there are no corporations in Germany.

48. You are, of course, aware that that makes a very considerable difference between Germany and the United Kingdom?—Yes, in a sense, but the facts go conclusively against a one-portal system, and in favour of having independent examinations at each University or medical centre. I will mention another fact illustrating the advantage of encouraging a high standard of education; there are no grinders at the German Universities any more than at the Scotch Universities.

49. With regard to the Bill before the Committee, you have an objection to Clause 5, have you not?—Yes; Clause 5 renders necessary affiliation, or as it is called attachment, to a corporation;

Chairman—continued.

poration; I doubt very much the expediency of making this compulsory; if the affiliation is left optional, it will be sought as an honour, but if you compel it, as under the Bill, there is no distinction, and it will be resisted some day; in fact, it will become the object of ridicule. I agree with what Sir James Paget said, that every man almost would seek affiliation voluntarily with one of the Colleges; not more than three in a hundred but would prefer doing so. Those corporations which it is desirable to perpetuate I consider would be quite safe without this compulsory affiliation. Lord Ripon spoke of this requirement in the House of Lords as a sham, and I think it a sham; I do not think that compulsory affiliation is a good thing. There is another point there, the power which the corporations have to refuse this affiliation; that relates to women. I maintain that if the corporations are to have the right to oblige men to affiliate, they ought also to be obliged to accept women. I know that members of the College of Physicians in London have declared that they would rather close the doors of the College than affiliate women. I think the world might get on without the London College of Physicians, but I do not think that we could do without justice to half of the human race. I would not allow them to oblige men to affiliate, and at the same time to slam the door in the face of the women. Then under that clause there is the question of the fee. There is an enactment that when this man is affiliated he is not to pay a fee; that the corporation is not to demand a fee. That is a remarkable regulation. It seems quite a miraculous thing that corporations or even universities should ask to be forbidden to take a fee. But on turning to the English joint scheme we find the explanation, and the objectionable nature of the regulation, I think, becomes evident. We find (pages 7 and 14, I need not read the words of it) that the student, before he is admitted to the joint scheme, has to pay 30 guineas, and receives three diplomas. The Government Bill requires only one diploma, but before this English joint scheme will admit the unfortunate student, he is obliged to pay for three diplomas beforehand. No doubt the scheme was drawn up before the Bill, but then this Bill was made to suit the English joint scheme. Again and again we see that it is specially adapted to that scheme. It seems to me, as in fact it is, an iniquity that a student who is required here by the Bill to have only one affiliation diploma, is obliged beforehand to pay for three, and this the support of three corporations. The no fee enactment will be an excuse for the corporations requiring all their diplomas to be paid for beforehand. It is a roundabout way of perpetuating all the three corporations. I think therefore that that should go out. The student should pay first an examination fee, and afterwards for the one affiliation (if affiliation is to be compulsory), and I would protect him in this way, that the Medical Council should regulate the affiliation fee.

50. What have you to say with regard to Clause 19?—With regard to Clause 19, there is a point about the equality of fees in every part of the kingdom; a great deal has been said about that by witnesses, and about the Scotch underselling the English. Why should the fees be uniform for the three proposed joint Boards? I do not see why it should be so; standard of

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examination is one thing, and equality of fee is another; I do not mean to say that we are all so very hard up in Scotland that we cannot afford 10 l.; Scotland is a richer country than many people suppose, but there are a great many struggling students in Scotland to whom 10 l. is of importance, who have not 1 l. to spare, much less 10 l., and I do not see why this equality should be enacted in the Bill. If we turn to the joint scheme of the English corporations we see what the meaning of this is; you will find that there are 30 guineas to pay under the English joint scheme, and this is to maintain three Corporations in London; five guineas, I see by the appendix to the scheme, goes to the museum of the College of Surgeons; that museum is, no doubt, a noble museum; I know nothing of its kind equal to it anywhere in Europe; but where is the justice of making a poor Scotchman or a poor Irishman pay 30 guineas because three corporations in London wish to be maintained, or because a London museum requires to be supported? We have our own museums in Scotland to maintain, and do it off the 20 guineas. I do not see the justice of that at all.

51. Would you object to the fees being settled to be the same amount in each part of the United Kingdom, not the same throughout the United Kingdom, but that there should be one fee, for instance, in all Scotland?—I would never draw a comparison between universities and corporations; they are different kinds of institutions; I think the fees are very nearly the same at present, but I never thought of that before; the Edinburgh fee for the joint qualification by the corporations is 2 l., and the Scotch degrees cost 2 l., but we never compare the two. What I object to here is to a Scotch board having to charge 30 guineas simply because the London Corporations require 30 guineas. Allow me to put the argument in another way: why not also require equal fees in the classes? If we compare the fees in the several classes, we find that they are much higher in London than in Scotland, and would it not be quite as reasonable, or as unreasonable, to have a clause insisting that for the anatomy, physiology, or surgery classes there should be the same fee in England, Scotland, and Ireland?

52. You have some objection, have you not, to the third schedule?—With regard to the third schedule, I have just this remark to make: in the note at the end of it the Medical Council have power to alter that schedule; that is a very important power, and I think it should require the sanction of the Privy Council, with notice to the authorities, before the schedule can be altered. I think that is a very serious power indeed.

53. You are aware that we have also had before us the constitution of the Medical Council; have you any remark which you wish to make upon that?—I should not wish to keep the Committee long upon that subject, because it has been already occupied very much with it. I cannot say that we feel very deeply in Scotland about it, except that the Scotch Universities are not sufficiently represented; for instance, Aberdeen is linked with Edinburgh, and we have had during these 20 years only one turn; we have only had one representative, for five years, over all those 20 years, and we feel that deeply. Why should the corporations in Scotland have

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more representatives than the universities? I think that the corporations generally have too much; for instance, the Apothecaries' Societies; I think the time has arrived when apothecaries' societies should cease to have a representative or to be licensing bodies at all. I do not wish to go into the general question of representation, although of course we have our opinions upon it.

54. I should like to know whether you are or are not in favour of any direct representation of general practitioners?—I used to be of that opinion. I am always on the side of liberality in these things, and I cannot see the very great objection that some have urged to it; but at the same time I do not think it is likely to do very much good; it would create great turmoil. Supposing you gave us one for Scotland, how are we to know about that one? One of the previous witnesses, I think it was Mr. Simon, made a remark in which I think there is a great deal, that you must know the man whom you send to a body like that. Now the north of Scotland does not know the south or the west, and I do not see that there would be very much good in it. At the same time I see no great objection to it, except that the Council is large enough already.

55. Have you any suggestion to make to the Committee with regard to the election of Members of Council?—If you mean direct representation, I used to think that it would be a good thing, but when I see men like Sir James Paget, who have had experience of the working of the Council, coming forward and saying what they did, I am inclined to defer to their opinion.

56. Have you any suggestion yourself to make upon that point?—The suggestion that I was going to make was, that as cutting down any particular body, of course, is a very painful thing, it might be done indirectly in this way: that, if there is to be a joint board system, the board should elect the General Council; the Scotch board would elect the Scotch members, the English the English, and so on. Then again, if there is not to be a joint board system, as we hope, that the three branch councils should elect the members of the General Council, each authority in that case sending a member to the branch council; for instance, Aberdeen would then send a member to the branch council. This plan, I think, would let down some of the bodies softly, and would save their *amour propre* a little, and that plan would fit either into a big council or a little council.

57. You would say that there should be a branch council in each of the three kingdoms which would be necessary for a co-joint board?—Yes, whether there is a joint board or not.

58. And then that they should elect to the General Council?—Yes; not necessarily for five years, but a certain number of them should form the General Council, say one-half, or whatever proportion was thought proper.

59. Would you suggest that there should be any direct representation of the members of the profession in the branch councils?—I have already said that I have no objection to direct representation at all, except that I am impressed by what some of the witnesses who are Members of the Council say. Our University, so far as I know, has no objection to it.

60. In making this suggestion with regard to the Council being chosen by the three branch councils, do you contemplate that the branch

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councils should be in any way directly elected?—Yes; if you adopt the principle of direct representation, then they would elect to the branch councils.

61. How would you compose your branch council for Scotland?—As at present, but with this difference, that the four Universities which have only two members at present, would each send a member to the branch council. Aberdeen and Edinburgh are grouped, and Glasgow and St. Andrew's, but if the grouping is to continue, I should imagine the best grouping would be Edinburgh and St. Andrew's in one group, as for Parliamentary representation, and Glasgow and Aberdeen. That would be a more equal division, and I see it is the grouping proposed in the Bill of Mr. Mills, Mr. Childers, and Mr. Goldney.

62. Do you think that it would be an advantage, or not, that the principle of direct representation should be acknowledged in the election of members for the branch council?—I should say that the same thing applies to the branch council as to the General Council. I would not make any distinction. If it is the right principle in one it would be the right principle, if you adopt this method, in the other.

63. Then I gather that you are not so much in favour of that as you were?—My former opinion has been a good deal shaken by the strong evidence against it by members of the Medical Council, who have had experience of its working, which I have not. These were, I think, disinterested opinions, and I attach much more weight to them than to the opinions of agitators and popularity hunters, or to the opinions expressed even in big petitions. At the same time I would make this remark, that, if there is any ground for direct representation at all, I have doubts if four or six are enough. I think if the whole body of the profession have a claim to anything, they have a claim to fully one-half. If you admit the principle, I think they are entitled to have, say, one-half of the Council. It appears to me that the chief use of direct representation would be to enable, not country practitioners, but the provincial medical schools to be represented. The provincial medical schools of England have no voice. London rules everything in England, but Edinburgh does not do so in Scotland. We have Glasgow and we have Aberdeen, and I think that that method would enable the provincial schools of England to send some representatives. But what should be the grouping and the selection is another matter, of course.

Mr. Arthur Mills.

64. I think I understood you to say that so far as Scotland was concerned you thought that the proposals of the Bill would rather tend to lower the medical education that is given there?—Yes, to lower it.

65. Is it to be taken as one of your main objections to the proposals of the Bill as it stands?—That is one of the objections.

66. You said also, I think in answer to the right honourable Chairman, that you did not think there was an advantage in having what is called the one portal in Scotland; did I understand you to say that?—Yes. The fact is, we say that, even were it desirable, there could not be one portal; the one portal would be a name only.

Mr. Arthur Mills—continued.

67. You consider it impracticable?—Yes; supposing that you had one body in name there would be such a crowd of 70 or 80 examiners that it would not be one portal.

68. With regard to the last point, when you were asked about the constitution of the Council, I think you said that the opinion which you had formerly entertained with regard to the possible advantage of what is called direct representation, had been somewhat modified by the opinions expressed by different witnesses before this Committee?—Yes.

69. And you instanced, I think, Sir James Paget?—Yes; when I see a man like Sir James Paget, who, as he says, depends upon the general practitioners having the courage to come forward and say that notwithstanding the petition of 10,000 practitioners, he thinks it would not be a good system, I am greatly impressed with that opinion from a man like Sir James Paget.

70. All the funds of the General Medical Council arise now, do they not, from the fees paid on registration?—I believe so.

71. Does that, in your judgment, give no argument at all in favour of direct representation on the part of the profession?—It is very difficult to say. If it were a payment from year to year I think it would be a good ground, but it is very difficult to give an opinion upon that subject.

72. It is the fact, is it not, that the funds of the Council do arise from that source?—Yes, entirely so.

73. Supposing that the proposal of the Government Bill before the Committee should not be thought satisfactory, so far as the constitution of the Medical Council is concerned, have you at all considered the question whether it would be desirable to make the Medical Council a sort of sub-department of the Privy Council, and to disestablish the existing Medical Council altogether?—I should not like to see the medical profession placed under the heel of a bureau. We would not submit to it long in this free country.

74. Did I understand you to say that you would prefer having three distinct Boards or Councils for the three kingdoms?—No; my view was that the branch Councils might be enlarged a little, at least in Scotland, and then the branch Councils would elect a general Council, perhaps a little smaller than the present one; but I would not like to see a small general Council; a Council of a dozen would be dangerous to our liberties, I think.

75. In the event of such an arrangement being made as you have proposed, did I understand you to say to the Right honourable Chairman that you thought that then there would be the element of representation introduced in Scotland?—My suggestion does not affect the question of direct representation; if you go for direct representation of the profession it would apply to the branch Council or to the general Council equally. Let me add to what I have said about direct representation, that I doubt whether the profession cares very much about it. There is a great deal of agitation about it, but if you were to ask the medical profession to pay half-a-crown a year for registration fee. I doubt whether one in a hundred would pay that half crown; they would not care about it.

76. You think that the question of half-a-crown or not would rather govern their action in 0.68.

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the matter?—I do not think there is much interest in it; that is really my impression.

Mr. Errington.

77. With regard to your opinion about the joint examination, I understand you to say that you are in favour of conjoint examination if it could be done without interfering with the bodies in Scotland?—No, I am not in favour of a general joint Board including the Universities and the Corporation; the thing would be an anomaly; the clay and the brass will not blend. I say that the Universities and the Corporations are so entirely different that they ought not to be mixed.

78. Did I understand you rightly to say that you were in favour of conjoint examination?—Yes, by the corporations, as we did in Edinburgh 20 years ago. We formed a joint examination by the College of Surgeons and the College of Physicians. I see no reason why the Apothecaries Society of Ireland, or of England, should take part in any joint examination at all. The College of Surgeons and the College of Physicians are all that is required, and if these two corporations of London and Dublin would only copy our so much abused Edinburgh, if they would only take us for an example, then the whole difficulty would cease. I do not believe that you will get a better joint examination anywhere than that for the Edinburgh joint qualification by my old college, the College of Surgeons, and the College of Physicians. You will not get a better examination, or better examiners, or better men anywhere, whatever Bill you pass.

79. You yourself, however, are thoroughly opposed to the conjoint scheme, as proposed in this Bill and by the English Board?—Yes.

80. And although you suggest amendments that is only under protest?—Yes, under protest.

81. You, I think, seemed to admit that there is a need in the interests of the public of some reform in the standard of examination for admission to the medical profession?—There is none needed in Scotland.

82. Not even in the licensing bodies?—No. Allow me to mention that our joint examination in Edinburgh was an admirable thing at the time. It was constructed 20 years ago, when I was working in that college, and I think the point which is deficient now there is, that the half qualification should cease. Each corporation still gives a separate diploma by a separate examination, but I think that should now cease, and their joint examination become their only examination. I maintain that if the two London Corporations, the College of Physicians and the College of Surgeons, would only follow the example of Edinburgh and have a joint examination, and make that the only means of admission to their licenses, the law at the same time requiring a complete qualification before registration, that the whole difficulty would be at an end.

83. You admit that there is a very general demand in England and in Ireland, and in Scotland to a certain extent, for a reform of some sort; I do not say touching the Universities, but at all events a reform to some extent?—Very little in Scotland; I think that the medical profession in Scotland, as a whole, is quite satisfied; I would like to say that, as the result of our Scottish university system, my impression is, that the medical profession in Scotland occupies

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pies a higher status than it does in England, that they are more educated men, and with less of the apothecary about them. We have never had an Apothecaries Company to lead us to charge by medicines, and the like. That is the result of our Scottish Universities; I know no country where the general practitioner is better educated than in Scotland.

84. Are you of opinion that under the present state of things degrees are ever given for an unduly low standard by any of the Scotch bodies?—Most certainly not; that was the old impression; Mr. Simon and other witnesses here, Dr. Quain, if I mistake not, hinted as if at something of the kind; those gentlemen do not know, they are not acquainted with the facts; they referred, perhaps, to what existed many years ago. Formerly the Scotch degrees, though always respectable, were not on the same footing as they now are. Edinburgh had the prestige of great names, the Monros, Cullen, the Gregorys, Allison, the Bells, Barelay, Knox, Liston, and Syme, and other great teachers, which the other universities had not; Glasgow and Aberdeen at that time were inferior in rank to Edinburgh, but ever since the Universities Act of 1858 we have all been on the same level; Glasgow University has just as good teachers as Edinburgh; it does not become me to speak of my colleagues in Aberdeen, but all these three Scotch Universities have had a high rank in both their examinations and teaching for the last 20 years, and I believe that the impression which seems to exist very commonly in England refers to the old state of matters, which was not satisfactory.

85. Your observations apply equally, do they not, to the medical bodies, for instance, to the faculty of physicians and surgeons in Glasgow?—I am not much acquainted with the faculty in Glasgow; if you will ask Dr. Gairdner, when he comes after me, he will be able to tell you, but I believe it is a very respectable body.

86. Do your remarks about the universities in Scotland apply equally to St. Andrew's?—I have spoken of the three teaching universities in medicine, St. Andrew's is on a different footing; it has no medical school; it has three scientific professors, in natural history, chemistry, and anatomy; but it is not a medical school at all.

87. You have stated that you are distinctly opposed to the proposed scheme before the Committee; do you think that the claim for reform might be met by giving wider powers to a Medical Council, strengthening its hands, and giving it whatever control reformers may think needful over such bodies in Scotland, or in England, or in Ireland, as might need control?—Yes, I am opposed to the scheme; I would not give the Medical Council absolute power; there should always be an appeal to the Privy Council; I think, perhaps, it has enough of direct power at present.

88. Would you prefer that to a scheme such as is proposed by this Bill, giving the Medical Council power to keep up to a certain standard the recalcitrant bodies, or in case they do not do so, to take away their licensing power?—I know of no such bodies in Scotland; I think that the Medical Council has that power at present, but it must represent to the Privy Council. I think that that is the safeguard.

89. Are you aware that that power has never been exercised by the Medical Council?—Yes, I

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am aware of that; it has never needed to do so in Scotland.

90. Supposing we had a Medical Council with that power, and so constituted as to act energetically when necessary, would that meet your views as to the necessity for reform?—The Scotch Universities would have no objections to the Medical Council asking power over the minimum; it has no power over the higher qualifications, and we are so far above the minimum that it does not concern us, but I would give it no power over the higher qualifications; Clause 20 of the Medical Act is clear as to that.

91. I apprehend that the Medical Council would have no reason to interfere with the higher qualifications?—No, certainly not.

92. It would only be in the case of corporations failing in their duty and acting in a manner inconsistent with public safety?—Yes.

93. It would have power on representation to the Privy Council to complain of the medical bodies?—Yes; I may mention as one of the reasons for objecting to the Medical Council having power over the higher qualifications that the Scotch Universities would not submit to it. We should have all the English universities and the corporations combining against the Scotch Universities, and endeavouring to anglicise them. We distinctly object to that power.

94. You mentioned that you were opposed to Clause 5 and to the scheme of compulsory affiliation with certain other bodies?—Yes.

95. Are you of opinion that supposing some such clause did not exist, a great number of bodies would become clubs, and at length fall out of existence?—They would not fall out of existence; I would leave them to the Darwinian principle of the survival of the fittest; the only bodies that would fall away would be the apothecaries societies. I wish to speak with all respect of the Apothecaries' Society of London; it has done good work of a certain kind in its day, although we suffered very severely from its monopoly up to 1858, but, now that the College of Physicians has taken its right place as a licensing body in medicine, I do not think it should be maintained; I think it should be allowed gradually to die away, either that or be pensioned off.

96. Would you be in favour of allowing medical men to join the profession without the responsibility of attachment to any of the recognised bodies, either the Universities or the examining bodies?—I have already given my reasons for objecting to compulsory affiliation if there is to be a joint board system. Lord Ripon's Bill was a better Bill if the thing is going to be done, it was logical and came down with the iron heel; but it was logical, and that Bill did not require affiliation.

97. I understand that you protest against the Bill altogether?—Yes, and as to affiliation, I consider it a device for the benefit of those corporations which are afraid to stand on their merits. I was rather amused when I heard the corporations setting up the theory of the influence it would enable them to exert, knowing how little they have cared for their licentiates in the past. The Colleges of Physicians and Surgeons are useful corporations, and do not require the help of compulsory affiliation.

98. Supposing it was proposed to give increased powers to the Medical Council, or to throw increased

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creased responsibility upon them, would not it then be desirable, do you think, to introduce either the direct element of representation in order to give confidence to the profession generally, or not to give them greater powers?—I think it questionable whether the present powers should be increased.

99. You are not in favour, as I understood from your answer to the Right Honourable Chairman, of direct representation?—I am not against it, nor are my colleagues against it. I have already stated my impressions.

100. But supposing that the Council were to become a more powerful Council, would not it then affect your opinion, and make it desirable, in your opinion, that the profession should be directly represented?—I do not know that. I would not give the Council much greater direct power than it has under any circumstances.

101. I am only assuming the case that if the Council was strengthened, would it be desirable that it should have the element of direct representation?—If the Medical Council had much direct power, it would become a dangerous body.

Dr. Cameron.

102. You mentioned that, in your opinion, the half qualification granted by the Edinburgh College of Physicians and the College of Surgeons separately should cease?—Yes.

103. What is your opinion as to the University half qualification?—There we give no surgical degree without a medical degree. That was meant to please the corporations at the time, but we give no medical degree without a man passing all the examinations for a surgical degree also. I think we should not give the one without the other. The University Commission of 1878 recommended that it should be a double degree of Bachelor of Medicine and Surgery, and we could do that at once. We would have no objection to do it.

104. Are you sure that the Universities have the power under their charter to grant the degrees of Doctor and Bachelor of Surgery?—Yes, degrees in medicine and surgery; but we could not do that without going to the Privy Council for sanction.

105. Have all the Universities that power?—Yes. Soon after the Universities Act of 1858, at the time of the discussions for the Universities of Scotland before the Privy Council, that was established.

106. You spoke about higher degrees; might I ask your opinion as to the desirability of an assimilation of the meanings of the different degrees; why is there in some places first the minimum degree of Bachelor of Medicine, and in others it is Doctor of Medicine, and in some places the Doctor's degree signifies a certain standing, and so forth?—Under the former system in the Scotch Universities, the Doctor's degree was the only one, but now there is the Bachelor's degree first.

107. Is that the case in St. Andrew's?—Yes; St. Andrew's is on the same footing as the rest in regard to students.

108. There was a question put by the Right honourable Chairman, which I did not exactly understand, as I know one or two others of the Committee understood it, at all events, that the standard of the Scotch University medical examination was lower than that to be met with

Dr. Cameron—continued.

elsewhere in the United Kingdom?—I could not compare the Scotch Universities and the English Universities, they are so entirely different institutions.

109. I mean on the point of medical education only?—No, neither in education nor in examination.

110. Is it not the fact that in point of medical education the standard of the Scotch Universities is equal to anything to be found anywhere in the United Kingdom?—If by "education" you mean the curriculum and our thoroughness, we are certainly as high and as strong as any University, or even stronger than any university. We require a better education than any other University in Great Britain.

111. In fact, the chief difference between the Scotch Universities and the other Universities in the country, is that you do not require a degree in Arts as preliminary for a degree in Medicine?—We require a very good preliminary examination; that is one of the changes which we underwent 20 years ago. When I graduated in Edinburgh I was only asked to do a bit of Latin. We could have done much more, but we were only asked for a bit of Latin; but now our preliminary examination is high, and it is the same in all the Scotch Universities. With regard to the degree in Arts, the Royal Commission that reported two years ago upon the Universities of Scotland did not recommend a degree in arts; they recommended a continuation of the present system of preliminary examination, but not a degree in Arts.

112. Does the St. Andrew's University examination afford any exception to the rule as to the high standard required for the obtaining of a degree which you have laid down?—I do not think that St. Andrew's has any candidates coming up from the student period; I think that they have had one or two during the last 20 years, but there is no medical school there. St. Andrew's was allowed by the Commission of 1858 to give 10 degrees a-year to registered practitioners who are above 40 years of age; that is to say, to give the M.D. degree to those who are of that standing.

113. After examination, I presume?—Yes. I can assure you of that, because I was one of the examiners. As there is much misapprehension in regard to St. Andrew's, perhaps I may be allowed to mention the facts. Since Dr. John Reid, the eminent physiologist, became professor there, in 1840, there has always been a good examination at St. Andrew's, conducted by the three local professors and by examiners from Edinburgh and Glasgow. Our aim was to keep the degree at the same level as in the other Scotch Universities, as far as examination, without residence, could do so. Nearly all the candidates were already qualified practitioners. This system ceased entirely in 1862, under Ordinance (No. 19) of the Scottish Universities Commission. As two of the four years of the medical study were now required to be in a University, St. Andrew's became, practically, closed for student candidates, but, if any candidate should come forward, he has just the same preliminary and professional examinations to pass as in the other Scotch Universities. There is ample security that no one can slip through easily there. The 10 registered practitioners, of over 40 years of age, on whom the Ordinance allows St. Andrew's

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annually to confer the degree of M.D., have to pass the professional examinations. The examiners at present are the three professors and four teachers from the Edinburgh school. I was examiner there, as was also Dr. Gairdner, and no one passed there under either the old or the new system, who did not deserve to pass. I feel bound to make this statement in justice both to St. Andrew's and its graduates, and as it is commonly supposed that St. Andrew's still remains open as a weak point in the Scottish University system.

114. There have been sundry efforts, have there not, for the establishment of a conjoint examination amongst the Scottish Universities?—That was an idea of Mr. Gladstone; and in the Scottish Universities Act of 1858, the 16th Clause was introduced by Mr. Gladstone, to enable the Commission and the Universities to carry out that theory if they saw fit. But the Commission and the Universities went strongly against any such thing for the Universities of Scotland, and the idea has no footing in Scotland whatever.

115. Could you give the Committee any idea as to the relation of the fees charged for which a man could obtain a degree at the Scottish Universities, so as to compare it with what it would cost him, say at Durham, for instance?—I do not know about Durham; they give very few. I inspected Durham as visitor of the Medical Council, and I think there were two candidates, or rather only one, when I was there; I do not know what the expense was.

116. Is the expense of a Scottish degree lower or higher than that, say for the double qualification from the licensing bodies of England?—It is the same as the Scotch Corporation double qualification, 20 guineas. The London fees in the proposed English joint scheme, is 30 guineas.

117. I presume you agree that it is an undoubted public benefit that no unnecessary expense or monetary impediment should be thrown in the way of good men getting degrees?—Certainly.

Dr. Lyon Playfair.

118. With regard to your last answer, you are aware that in the Bill the idea of having uniformity of fees is for the purpose of preventing men going from London to another part of the kingdom, where they might get an easier examination?—Uniformity of fees, however, would not affect that question.

119. Supposing that another part of the kingdom were to tempt men by low fees and by a lower examination to come to them, the idea of the promoters of the Bill is that that might tempt away men from the supposed higher examination in London?—Those are two distinct points, the standard and the fee; the Edinburgh fee for the double qualification is 20 guineas, and the proposed one in London is 30 guineas. Now I do not think that a great temptation; if a man were to go to Edinburgh and live there for a week or a fortnight, it would cost him 10 guineas at any rate. It costs me more to come up from Aberdeen to London for three days, and if a student had to leave London and go to Edinburgh for an examination, it would cost more than the difference.

120. As a matter of fact, as things at present stand, after the last 20 years, the examinations in Scotland, either in the Scotch College of

Dr. Lyon Playfair—continued.

Surgeons and Physicians, or in the Universities, have not been lower than those in corresponding institutions in England?—They have not. I believe there is no better examination by any corporation than that of the College of Surgeons of Edinburgh; I have seen various insinuations, but I know no more honourable body of men than those whom I had the advantage of being associated with there. A body so long guided by William Wood and John Gairdner could not be otherwise than pure, and their mantles have fallen upon worthy successors; I entirely repudiate the unworthy insinuations.

121. If there is any looseness it is a question of history, and not a question of the present?—I am not aware that there ever was a looseness in the Edinburgh College of Surgeons; it has always been a leading and honourable body. It has also maintained a large anatomical and pathological museum (second only to that of the London College of Surgeons), a museum in which I have spent many a useful hour.

122. Is it conceivable that it might have been so in the College of Physicians?—After the passing of the Medical Act of 1858, the Colleges of Physicians came forward as licensing bodies, the London and Edinburgh Colleges took different ways of doing so, and there was some confusion the first year, but all that has passed away.

123. With regard to what you have said about Germany, you stated that it was the fact that Germany had, to a very great extent, centralised its examinations in Berlin?—Yes.

124. But since then it has decentralised them, and connected them with the University system, in 20 Universities throughout the kingdom?—Yes, it has.

125. You stated also that the system was practically the same in the Scotch Universities; that there were professional examiners and extra-academical examiners in existence also in Germany?—Yes.

126. And the State appoints the extra-academical examiners?—Yes.

127. Would it not produce exactly the same thing if the extra-academical examiners in the Universities of Scotland just now had to be approved by the Medical Council?—It would, and we would have no objections to outside examiners coming down and assisting us.

128. That would give, would it not, precisely the same security which is now given by the State in the University examinations in Germany?—Quite so.

Mr. Wheelhouse.

129. You have told us, in the early part of your examination, that your professors continue teaching to the last. May I ask you whether that has not a tendency to stereotype both the examination and the teaching?—When I say to the last, I do not mean that we go on into old age. We have the means of retiring now upon allowances, but we do not give up our professorships as soon as we get into good practice.

130. Supposing that a professor continued very long in his chair, and performed his duties continuously, is it not likely that his professoriate would stereotype him, and his lectures and examinations, so far as his class is concerned?—No, we do not find that to be so. It may be the case with grinders, but not with men who devote their lives

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lives to the teaching and cultivation of their sciences.

131. You also say that a professor is not very actively engaged either in the surgical or the medical branches of his profession?—Professors of medicine and surgery in Scotland are generally busy as the chief consulting physicians and surgeons, but they make their professorships their primary duty.

132. You state that St. Andrew's has no medical students, but it has three chairs, has it not?—It has no medical school, but it may give a year chemistry, natural history, and physiology.

133. You have spoken of its giving 10 M.D. degrees a year; does it give no other degrees except those 10?—Not in medicine; it would if it had any candidates, but there are no candidates.

134. Supposing that there were; supposing that I went to St. Andrew's as a student in medicine at the University, I suppose that you would have to accept me as a student in medicine?—Yes, if you complied with the ordinances of the University Commissioners, but there is a staff of examiners, specially appointed.

135. Then I could, could I not, obtain an M.D. degree at St. Andrew's, without going anywhere else to complete the requisite university education?—You could not get your degree there without having gone through a full educational and medical examination.

136. So that for all practical purposes the granting of the M.D. degree at St. Andrew's, excepting the 10 by statute, is simply useless?—Practically, it is so.

Mr. Mitchell Henry.

137. Do I gather from your evidence that you think that the best thing as regards medical education in Scotland is to leave things exactly as they are?—I would require a double qualification; but that applies more especially to England. The least thing that can be done is to require a complete qualification before a man is registered. I would not register a half diploma.

138. I am confining my question to Scotland; do you think that the best thing for medical education, considered from a public point of view, would be to leave matters in Scotland as they are now?—Most certainly.

139. Are you aware that there are 19 licensing bodies now in the United Kingdom?—I am.

140. And that of those 19 Scotland has nine?—Seven; four Universities and three Corporations.

141. What is the difference between the University, King's College of Aberdeen, and Marischal College, Aberdeen?—They were united 20 years ago; they are one University.

142. Then the number has to be reduced to seven; and you think that that is a desirable course for obtaining a qualification for practice?—I think that the Universities should not be dragged into any joint board system, but that each University should be complete in itself. In Scotland they are all on such a footing that they may be entirely relied on, and then I say that the corporations should not give half diplomas; and I would have the joint examinations certainly the only one for the corporations.

143. These seven licensing bodies in Scotland give 22 registerable qualifications, do they not?—That is a certain way of putting it. The Universities give the ordinary qualification in medicine and 0.68.

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surgery, and then afterwards a man comes back again and graduates as a doctor, but that is the same man, and he takes three of them.

144. Does he necessarily take three of them?—He may take the medical degree if he has also passed for the surgical. We will not allow a man to pass for the medical without passing for the surgical degree; but we do not oblige him to take the surgical unless he likes. That is a weak point which might easily be put right, but we never allow a man to pass for the medical degree without passing for the surgical also.

145. Then you do admit that that is a weak point in your system?—A very small one, if it can be called weak; I do not know that it is; we can easily put that right, and have no objection to do so.

146. But you are deliberately of opinion that the medical teaching in Scotland is much more thorough and complete than it is in England?—Very much more thorough; the fact is, our English friends do not know what the Scotch system is; they should come and see it; they do not understand the thoroughness of the Scotch medical education. It is a most thorough system.

147. You said, did you not, in your evidence, that the teaching of anatomy in Scotland, and of medicine and surgery, was in each instance more complete and thorough than it is in any other part of the United Kingdom?—I think so, very much more so than in England.

148. Will you tell us, shortly, in what respect you think it is more complete, except in that point which you mentioned, that in Scotland the professors remain longer as teachers?—It is not their remaining longer, but that they devote themselves to their work. It is the same as with a trade; if a man, from his youth, is educated to a business he becomes master of it, and continues in it. In London the system is that a man teaches for a few years, as a stepping stone to practice. That is the position of the teachers, with one exception, the subject of physiology in University College. That is modelled on the Scotch University system. Dr. Sharpey, who was educated in Edinburgh, carried the Scotch system up, and has done his best to establish that system in University College. You see the Scotch system working to some extent there, in physiology.

149. You are thoroughly acquainted, I presume, with the system of teaching in London?—I have a very good idea of it.

150. What would you name as the length of time during which you think a man ought to remain as a teacher without being liable to the stigma that he teaches only until he obtains sufficient practice; sufficient practice to make it worth his while to leave his chair?—I would not call it a stigma; it is the natural result of the London system. In London you have to begin teaching in any branch that you can get hold of. You start, say, as a demonstrator of anatomy; then you lecture on anatomy, then you become an assistant surgeon, then you get to be lecturer in surgery, and when you get busy in practice you give it up altogether; it is the system I am speaking of, not the men.

151. How many years do you suppose that Sir Benjamin Brodie taught surgery, for instance, in London?—I could not recall that now.

152. Would you say 25 years?—I could not recall

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recall it now. He was an eminent man, with scientific tastes.

153. In the case of the late Sir William Lawrence, how many years was he professor of surgery?—Sir William Lawrence was a great teacher, and he remained, I believe, a long while in it. He was fond of it. I do not know how long, but I think it was pretty long. These were exceptional cases.

154. It is an entire error to suppose that the teachers in London teach for a few years and then leave their chairs when they obtain practice; the real fact is, that persons in the highest practice in London are the teachers of medicine and surgery in the metropolitan schools?—I think you will find it is not so, if you inquire, but will you allow me to add that I do not criticise the teachers, they are first-rate surgeons and physicians in London; it is the result of having so

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many schools in London, and of the want of institutions like the Scotch Universities.

Lord George Hamilton.

155. Did I understand you to say that if this system of conjoint examination was carried out, and the fees were uniform throughout the United Kingdom, the fee of 5*l.* which was paid by every candidate in Scotland and Ireland would go to maintain the Museum of the College of Surgeons in London?—No, I did not say that; I meant that if 30 *l.* is to be charged in London, 5 *l.* of it is on account of the Museum, and a part of it on account of keeping up the Apothecaries' Society, and that there is no reason why the Scotch students should have to pay more than the Scotch Corporations require, viz., 20 *l.* I referred to the fact in order to show that this joint board scheme is devised to perpetuate the three corporations.

Professor WILLIAM TENNANT GAIRDNER, called in; and Examined.

Professor
Gairdner.

Chairman.

156. You are Professor of the Practice of Medicine in the University of Glasgow?—Yes.

157. And have been so since 1862, I think?—Yes.

158. Formerly you were lecturer in the Edinburgh Extra Academical School from 1853 to 1862?—Yes.

159. And attached to the Staff of the Royal Infirmary from 1846 onwards?—Yes.

160. You graduated at the Edinburgh University in 1845?—Yes.

161. What is the present position of the Glasgow Medical School?—It is not so large or so important a school as Edinburgh, but it is also a very large school, and for 20 years it has been steadily increasing in numbers. I shall put in a return of the number of students in the faculty of medicine matriculated in Glasgow University for each year from 1861 onwards, which shows that from 283 matriculated students in 1861, it has now advanced to 560 matriculated students of medicine. The details of the return will show that it has nearly doubled within the time I have mentioned, and that it has increased more than a third within the last six years (*delivering in the same*).

162. This increase is part of an increase observed in all the three Scotch teaching Universities?—I think it is part of a fact that is common to them all.

163. In Glasgow you would say, would you not, that it was accompanied by a great increase in the means of teaching?—A very great increase indeed in the means and appliances of teaching, both practical and scientific.

164. It is not in consequence of any decreased stringency of the tests in examination?—Most certainly not; I can give most clear evidence upon that subject also.

165. That stringency has increased rather than diminished?—It has decidedly increased; and my own personal experience, extending from 1862 onwards, shows that there has been a very great increase in stringency, and a continuous increase in so far as it can be demonstrated by numbers, although I do not in the least advocate that it can be demonstrated by numbers. I shall put in a return of the number of candidates in

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each professional examination in medicine from 1874 to 1879, with the proportion of the passed in each examination, and the proportion of the remitted to the whole number of candidates (*delivering in the same*). The details of this return will explain themselves, but the essence of it I may just put thus: In the first professional, from 1874 to 1879, that is to say, the examination that bears upon what you may call the elementary biological sciences, there were 845 candidates during those years, and of those 456 passed, and 389 were remitted; the proportion, therefore, remitted was 44·7 per cent. In the second professional examination during the same years there were 568 candidates; of these 375 passed and 193 were remitted; and the proportion remitted was 34 per cent. In the third professional and final examination there were 414 candidates and 334 of them passed, and 80 of them were remitted, the proportion remitted being 19·3 per cent.

166. May those who are remitted come on the next year?—They may come back again, but they must wait a year.

167. Is that proportion larger or not than in the case of the other Universities?—I believe it is larger than the other Universities, but in the case of the first professional examination it is exceedingly heavy. I may state that I myself was quite surprised and alarmed at the proportion of the remissions within the last few years in the first professional examination, and it was only by looking carefully into the matter that I was led to acquiesce in it at all in my own mind.

168. You must be aware that there may be two explanations of that: one is, that the examination is very stringent, and the other is, that the teaching had not been sufficiently good?—That is just precisely the way that I put it to myself, and it was only after inquiry I ascertained that it was really dependent upon the necessity of putting back a considerable number at the beginning in order that they might take to their studies again and come back better.

169. Would it be accounted for by the supposition that you have been screwing up the examinations in consequence of their being so over lax before?—But it has been quite a gradual process, extending,

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extending, as has been described, over all the 17 years that I have been a professor.

170. In the examination the professors are assisted in every branch by examiners outside the University, are they not?—Yes; they are appointed by the University Court.

171. In like manner as is the case in Aberdeen?—Quite the same as in Aberdeen and in Edinburgh.

172. In regard to the outside examiners, have they given any opinion as to whether your examination is sufficiently stringent or not?—I have had occasion to sit in the chair of the Medical Faculty during the determination of the results, and I have hardly ever heard an outside examiner complain of the laxity, but almost always of the stringency of the examination. His influence has generally been given to tempering the stringency.

173. Have any ordinances been passed lately with regard to the professional examinations?—There has been an alteration by the Privy Council at the instance of the Senatus of the University of Glasgow in 1877, bringing up the number of examinations from three to four. It was originally two; it then sprang up to three, and it has been, since 1877, arranged to be four, so that ultimately it will come to this, that at every stage of his progress the student will be tested and sent back if he is not sufficiently advanced.

174. Is it or is it not possible that a student who has either been plucked, or has seen that he certainly would be plucked, or probably would be plucked, by another examining board, can come to your University with a chance of success?—I should say that it was utterly and physically impossible, because as he has got three or four examinations to pass, he simply cannot do it. It is impossible for him to do it within the time stated. Would you allow me to refer to this point rather particularly, because I observe that in a previous portion of the evidence given before this Committee, it was touched upon at Questions 478-9 and Questions 484-5. This question was put to Dr. Acland by Mr. Wheelhouse: "Is the education in Glasgow equally good;" and Dr. Acland's answer was, "I have no reason for doubting it." Then he was asked, "Is it true that a gentleman who can go with his credentials as a surgeon from England to Glasgow can receive the diploma of the University of Glasgow for the payment of something like 6*l.* or 7*l.*, bringing the M.D. degree back with him?" and Dr. Acland's answer (observe, as President of the Medical Council, who ought to know) was, "I do not know that we have any evidence about that." And then, in a subsequent question, it is put to him, "I merely want to arrive, if I can, at a comparison of the cost of an English diploma of M.D. and a Scotch one;" and his answer is, "That is the reason why I gave that answer to the question, that an Oxford University M.D. cannot be got without spending four years in Arts' study, and four years after that in medical study, and afterwards three years before the M.D.; and therefore to compare that with the possible suggestion that a person may travel by train to Glasgow, and bring a degree back, is to compare things that have no ground of comparison whatever, because a person cannot get an Oxford University degree in medicine except by going through this long course of study, preliminary,

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scientific, and practical, partly in Oxford and partly elsewhere." With all due respect to my friend, Dr. Acland, I beg to say that this is either a state of invincible ignorance, or a state of marvellously shutting his eyes to the facts; and that the President of the Medical Council ought certainly to have been in a position to contradict that absolutely, because he knew, or might have known, that the regulations in Glasgow University were such as absolutely to preclude this, just as much as the regulations at Oxford.

175. You spoke chiefly as regards your scientific and theoretical examinations; have you any remark to make about the practical and clinical examinations?—The clinical examinations are substantially on the same principle as the others; they are all done partly by the professors and partly by non-professorial examiners; but the point of the Glasgow system and that of all our Scotch Universities is, that a large proportion of men being turned back in the first and second professional, the proportion that come on to the clinical examination is by that very fact a selected class, and therefore the proportion of rejections there, although it is still considerable, is not nearly so heavy. And as regards the clinical and practical examinations in particular, I may say that they were thoroughly inspected by the Medical Council in the year 1867-68, and again in the year 1874-75, and, in the case of the clinical examinations, in the first inspection of them, I believe, I was able to show that we had begun those examinations earlier, and brought them into a more thorough condition than any examining board in England at the time. And the recognition of that is given in these words, at page 118 of the Minutes for 1868: "The fact that we have given the details of these examinations at such length shows what value we attach to them. We cannot conceive any test more complete and more searching than these examinations, which we witnessed with great interest, and, let us add, instruction." Then in the case of 1874, the later inspection, they described the method of examination, and they say, "The examination was conducted with great patience and scrupulous care, and the marks were fairly assigned." I believe it is a common thing to say that the practical parts of the examination are apt to be neglected in universities where the scientific parts are developed; but this is certainly not the case with us.

176. You are yourself in very extensive practice, are you not?—Yes; I am not, however, the only clinical professor or examiner.

177. The teachers of the branches are each of them what you would consider specialists?—Each professor is a specialist in his own subject, and each professor with the non-professorial examiner exercises a perfectly independent judgment with regard to that subject; they confer together at the end, but each man exercises a perfectly independent judgment, so that a number, the significance of which is generally understood, indicates the position of a student in any subject. I wish, too, to say that the institution of the professional grinder, which is so common and largely developed in many places, is almost unknown in Glasgow. And I wish also, in general terms, to say that I repudiate altogether, so far as the Glasgow University is concerned, the idea of any competition downwards. In all the Scotch Universities

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Universities the competition for years past has been upwards, and upwards entirely.

178. You mean, do you not, as between the Universities?—Yes, as regards the three teaching universities.

179. There is nothing approaching to a Dutch auction between them with regard to examination?—Certainly not; perhaps I might just say, further, that there is another irregularity which we have heard talked about in this Committee which does not exist in Scotland; there was something said about March hares, that is to say, about men coming late in a session, registering late, and coming late, and getting certificates, although there was no attendance; I may say that that is simply impossible.

180. What is the length of your terms?—Over five months, in winter.

181. Have you two terms in the year?—Yes, we have two terms; the summer term is three months.

182. What regulations have you with regard to attendance?—The regulations with regard to attendance are that the book of enrolments is closed about the middle of the first month, and no name is admitted after that without a special reason, and after that the roll is called daily, or the attendances ascertained daily in some way or other; and it is marvellously steady. In my own class a large proportion of the men do not omit a single roll. It is particularly striking in the clinical department. We call the roll, according to statute, twice a week in the clinical department. The other days the students attend in the hospital, and I have often noticed that the attendance is quite as good, or nearly as good, on the days when no roll is called as on other days; there is no kind of seamping of the work; the section regularly sit down to a case and work it out, and deal with it in all its bearings under the eyes of the professor; everything that is made matter for clinical instruction is thus gone into most thoroughly, so that what is called "walking the hospitals," that is to say, just dropping into a ward and staying as long as you like and going away again is quite unknown in Glasgow, and it would not be recognised in any shape whatever.

183. Having told us what you consider to be the state of your medical school, what do you wish to say to us with regard to the proposal for conjoint examining boards?—I wish to say that they would, in my opinion, very greatly derogate from the efficiency, not only of the Glasgow University, but of all the University schools in Scotland; I am speaking just now for those Universities that have schools; St. Andrew's I really do not think has any interest in this question at all practically either one way or the other, because by the present regulations of St. Andrew's they cannot put graduates on the register to any considerable extent.

184. Do you generally agree with Professor Turner, and also with Dr. Struthers?—I certainly do; I agree with Professor Turner very much throughout, but I would just say that I take a little stronger view than Professor Turner of the injury that would be done generally to our system by the conjoint board system; I have no doubt he has said already that it would tend to lower considerably the prestige of the university degree; it would, in the first place, take away from it the legal privilege which was

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affirmed in the Act of 1859, but which practically was enjoyed by the graduates of the Universities for a century and a-half, and on which the efficiency of our whole system is built; the privilege, namely, that the degree practically conveys a license to practise. It is a higher qualification, but it conveys also the lower qualification, only that our students are not distracted during the whole course of their curriculum by the idea that they must go up to London, or to Edinburgh, or to somewhere else, to pass a totally different examination; and you can easily imagine, now that they have four examinations to pass for us, how distracting it is upon the attention of a student if, during the study necessary to pass four examinations for his own University, he has also to keep in view an examination for a totally distinct body, and an examination of a lower kind, or, if not a totally distinct body, an examination conducted by a set of men that he knows nothing about, very probably upon totally different principles, and very likely with a lot of grinders at the place to work up men for this examination specially, as is done for the Indian examinations, and many others. The students of Glasgow would be perplexed by the idea that they would have to go at a certain period of their career to another place to put themselves under a set of grinders, and so to work for a different examination.

185. What I understand you to mean is this, that inasmuch as the student must get a degree, and the degree would depend upon the conjoint examination, that your examination would become of less importance to him than the conjoint examination?—Certainly; and moreover that the distracting effect upon his studies would be very great. A student needs all his time, and all his brains, for his proper study.

186. I suppose you agree with the other objections which have been stated with regard to the additional expense?—I agree with them entirely.

187. You are aware, are you not, that quite independent of the University examinations, there is a strong feeling that it would prevent minimum examinations, not so much by Universities, but by other bodies, to have a conjoint one-portal examination for each of the three kingdoms; supposing on national grounds that this feeling is admitted to be a strong one, is there any way by which the objections of your University could be removed?—I would say only one way, Give me the portal, but bring it to Glasgow. Instead of sending our students away, let us have the examiners with us in these Universities, and let them confer with our examiners; we do not fear any amount of inspection, or any amount of conferring with us.

188. That is the proposition, is it not, of the Duke of Buccleuch?—Substantially, in principle, it is, but I am not tied to the detail of the Duke of Buccleuch's proposition.

189. The other suggestion, as doubtless you are aware, which was made by Professor Turner, and also to-day by Professor Struthers is, that the theoretic and scientific examination should be conducted by the Universities, and that the final clinical and practical examination should be conducted by the conjoint board?—I should very much prefer the first plan to the second; I do not think the second is a sound principle at all. The second goes on the principle that you will trust
your

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your University examiners up to the last point, and you will not trust them at the last point. You will show distrust of them just at the very point where it is most important that the student should have thorough confidence in his teachers, and believe in them thoroughly. I say, send down men if you please to attend our examinations, and let those men concur with us. I will engage, on my part, that I will never pass a man who is not approved by the conjoint board examiners.

190. I put it you rather in another way, that the reason of this proposal is not any want of trust or confidence in the University examination, but the advantage upon general grounds of having one final examination, which would be in the form of a final practical examination, for all persons who get a degree?—I do not care what the reason of it is. My argument is, that whatever the object aimed at in theory, the practical effect of it upon the minds of the students would be bad; and that it would not only disturb our University system, but would to a certain extent tend to make our students cut University education out of their programme altogether. The idea of the legal status being attached to something else than a University degree, which could not be won by a University degree, would tend to make intending students forego a University education.

191. In order that one of your own students should be able to practise, he would require a final diploma, and in order to get that diploma he would have to get your certificate for his theoretic and scientific education, and the conjoint board's certificate for his clinical and practical examination; it appears to me that he would be quite as much dependent, if not more so, upon the University than he would be upon the conjoint board, inasmuch as it would have to do with so very large a proportion of his education; do not you think that that would remove your objection a good deal?—Of course it would be better than extending the conjoint board system over the whole University education, and making the candidate for a degree pass two examinations in each department; but to the extent of his passing two examinations in any case, when one would suffice, I think the thing is bad, and to this extent its tendency is to weaken the prestige of the degree. I think it is bad, and I proffer you this alternative; I say, give me your examiners; send them down to Glasgow, and let them concur with us, and I am not in the least afraid of the result.

192. When you say that it would give him two examinations instead of one, I suppose it comes to this, that the theoretic examination is so distinct from the clinical and practical examination that it really would be two examinations in place of one very long examination, which would take as much time?—Yes, but the plan proposed would imply the doubling of that very long examination unnecessarily. I think the doubling of the examination to whatever extent it is done is a great disadvantage to the students and a great weakening of the system of the Scotch Universities.

193. Have you any further objection to make to the conjoint board?—Yes. I will venture to make this one observation further, that if the conjoint board system tended ever so little to make a single student, and still more, of course, if it tended

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to make a great number of students, or any number of students determine to forego a University education, and to go in only for the education that will qualify for the conjoint board, I think that a very great evil would follow, and I should wish to point out that the special character of that evil, viz., that it would induce the student to give the go-by to those portions of his elementary education which we in Scotland consider the most important; that is, the fundamental sciences in biology, zoology, botany, and chemistry, so far as it is physiological, and so on; it is a peculiarity of the Scotch University system that it attaches great importance to these studies, that it gives them a substantive status, and it determines their results in that first examination in which, as I have told you, there is so large a proportion of rejections, and this large number of rejections shows that we deal with these subjects in a thorough fashion; that we are not satisfied with a mere minimum or a sort of sham training in them, or a grinding of them up in books, but that we teach them practically, and work them up through museums and laboratories, and all kinds of practical assistance. Now, if any large proportion of the students are induced by the conjoint board system to give the go-by to the University, and to content themselves with the training of schools that do not exercise that influence upon their students with regard to those preliminary branches, I think the whole quality of medical education will suffer thereby. I may just say that within the last few weeks I have had sent down to me a set of resolutions of the London teachers in medicine. Now I have the very greatest possible respect for the London teachers. I know many of them personally, and they are men of great eminence, and I should be the last man in the world to say a word against the London school; but the suggestion at this meeting of the London teachers was that botany, zoology, or what we call natural history, elementary chemistry should be thrown out of the medical curriculum altogether, and left to the secondary schools, and only tested by an examination. That is evidence, I think, so far as it goes, of the tendency of medical education apart from a University.

194. Have you been able to form any opinion as to the proportion of Scotchmen who go into the medical profession that go through the Universities and that go through the Corporations?—I think Professor Turner submitted some facts upon that subject, or at all events he submitted it in more detail than I am prepared to do, but it is a very considerable proportion.

195. Do you think it is increasing or not?—I think it is increasing on the whole. But I wish to point out to you another difficulty I have. Suppose a student in England, destined for practice in England, and suppose his father or his adviser counselling him where to go for his education. Under the present system which has been in operation since the Medical Acts, he knows that he can go to Scotland, and by passing through this long course of training and special examination he can get a complete qualification from the Universities. But under the conjoint board system he will be told at once,—You cannot get a complete qualification from the University as a University. Now then, where is he to go? He is destined for practice in England, and therefore, in all probability, his

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guardian or parent would like him to join one of the English colleges, and it is perfectly right that he should do so; but if he is to join one of the English Corporations he must needs pass the English conjoint Board, and then there at once arises the question for his guardian or adviser,—Why should I send him to Scotland and make him go through an expensive University education, and then pay 15*l.* or 20 *l.* at the end of it for a degree which will, after all, not be a legal license to practise?

196. At this time I suppose you have a great many medical students coming from England?—Yes, we have a good many.

197. As many as at Edinburgh?—Not nearly so many as at the Edinburgh University, but we have always a considerable number. I could give you the proportion, but, whatever the proportion, that is the light in which it would appear. He knows that he has got to pass the conjoint Board in London; he knows that he must keep himself qualified for it, and he knows that in the end he must go to a good London grinder to prepare him for it, and what is the good then, he will say, of a man going down to Scotland to get a university degree?

198. The result is that he will not come to Glasgow?—He will not come to any Scotch University under those circumstances, in all probability. I think, therefore, that the peculiar evil that would be wrought by the conjoint Board system, would be that it would tend to strike out of medical education, or to insist much less upon the importance of, those biological sciences which are the very essence and root of the training in the Scotch Universities.

199. I think I am right in supposing that if, as has been suggested, your examination with regard to those sciences was admitted to be an examination that was necessary, in order for all your own students to get a diploma, that objection would disappear?—Except that the student who has got to appear before the English conjoint Board in order to obtain a legal qualification; that is to say, the Englishman, who if he has it in view from the first to join an English college, must needs appear before the English conjoint Board in the end, will have an artificial loading put on in favour of conducting his whole education in London.

200. Why is it necessary that he should come before the English conjoint Board?—Because he cannot get to be a Fellow or Member of an English College without passing the English conjoint Board. The Scotch conjoint Board will not, as the Medical Acts Amendment Bill now stands, admit a man to join an English College.

201. But it will admit a man to practise in England?—Yes, to practise, but not to join an English College.

202. I suppose the promoters of the Bill anticipate that the final diploma given by the conjoint Board would be very soon, if not immediately, considered as good as the present diplomas of the Colleges of Surgeons and Physicians?—The legal qualification given by the conjoint Board is intended to include the diplomas of the colleges. It is difficult, I dare say, for even the Members of this Committee, and it is certainly very difficult for all of us to study all the phases, and turnings and windings of this Medical Bill. But through the various charges that have

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been made in it by Lord Ripon and the changes since then, it comes to this, that a man going to the conjoint Board in England, Scotland, or Ireland, and passing that conjoint Board, gets a certificate that entitles him without further examination or payment to join a college in that division of the kingdom, but not to join a college in any other division of the kingdom. This conjoint Board examination being passed, allows him to claim a licentiatehip of any of the three bodies in the same division of the kingdom.

203. It allows him to claim it, but it is hardly, I think, what you seem to imagine; if a licentiate applies to any one of the Corporations for it, and if the Corporation refuses to give it him, he then cannot force them to admit him, but he can get upon the register without being attached to them; that is rather different from what you have stated?—It is a technical difference, but I have in view what the great majority would do; everybody knows that this little qualification was put in to prevent the Corporations from being obliged to attach ladies; had it not been for the ladies it never would have been there; the whole thing is a mass of inconsistencies and absurdities; it practically means that the corporations are not to be obliged to admit ladies unless they choose, and that ladies are to get on the register without such admission; but practically, in the case of the great mass of students, if they wish to join an English Corporation in order to obtain qualification, they must pass the English conjoint Board, and therefore, they would think twice about going to get any of their education in Scotland.

204. If in the 15th line of Clause 5 the words "The said part of" were omitted, then, I think your objection would be removed, and I think what would then result would be that any licentiate would be able to apply to any of the Medical Corporations in the United Kingdom?—Very well; but if you propose that in the House of Commons and try to carry it, you will have all the English Corporations against you at once, because the English Corporations do not want to admit a man unless he is examined by the conjoint Board in England; which implies his having paid the fees that go to their support.

205. But you would not object if a man who was examined by the conjoint Board of Scotland should have the same right to join any one of the Corporations either in England or Scotland as he would have if he was examined by the English Board?—That, of course, would diminish my objection very much; but it would be wholly at variance with the general plan of the Bill, and with the allotment of the fees under the English scheme, which would become law by Clause 16 of the Bill.

206. Were you ever a member of the Medical Council?—Never; I have no great desire to be so.

207. You are aware that the question of direct representation upon the Council has been brought before us a good deal; have you any opinion upon that subject which you would wish to bring before the Committee?—I have no very strong upon it at all; I think there is a great deal of reasonableness in the demand, and if the machinery were adjusted so as not to make it very cumbersome and very troublesome I should not object to it; I confess that personally I shrink from the notion of periodical agitation in the medical

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medical profession, and canvassing or anything in the way of a plebiscite for the purpose of sending men to the Medical Council; I shrink from that personally, because I do not think it would be good for us in our ordinary avocations; but beyond that personal objection I have no objection to it; I should think it is reasonable that the general practitioners should be represented, and if they cannot be represented otherwise, I have no great objection to direct representation.

208. Do you think there are any practical evils arising from their not being represented?—I really do not think so. If the Medical Council confined itself to its own proper work it is quite competent to do it just now, but I am opposed to anything like a medical parliament; I think that is utter nonsense.

209. What do you mean by its proper work?—Medical education and registration.

210. You would say that the Medical Council had better not deal with more than that?—Much better.

211. For instance, with regard to such a question as the due relations between the medical profession and the State, as to whether they do or do not receive sufficient remuneration, you do not think that that is the business of the Medical Council?—I think not.

212. Such a case as that would be better undertaken, would it not, by special bodies formed for the purpose?—I think so, certainly. It is difficult to exclude such things from the purview of the Medical Council, but I do not think it is their natural business, and I do not think it is the business for which they were appointed.

213. What I mean is this, if the members of the medical profession thought that they were aggrieved by the action of the State or by the local authorities, it would be better that they should form themselves into some union for the purpose of representing that grievance than that they should resort to the Council?—Certainly. I think that the Council being large and being a representative body, and naturally carrying a great deal of weight as representing the medical profession may occasionally occupy itself with such things, but I do not think that should be its regular work.

214. Have you formed any opinion as to the number of the Council?—That depends upon my view of its duties. If it is to be a medical parliament, and to go into everything respecting the medical profession, then probably it is too small, but if it confines itself to its proper duties I think it is too large; I think the present tendency of it is to waste time in discussions, and that it is quite unnecessarily large, and any mode by which it would get smaller, whilst preserving its representative character, I think would be an advantage.

215. Have you any remark to make with regard to the Scotch representation?—I think that the Scotch representation, as far as the Universities are concerned, is monstrously inadequate as things stand just now. If it is to be viewed at all as a matter of representation, or as a matter of numbers at all, it is monstrously inadequate. It is absurd, on the face of it, that a University like Durham, or even a University like Oxford or Cambridge, which I have no desire to disparage, should send each a whole member to the Medical Council, and the Univer-

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sity of Edinburgh should not have a member to itself, or Glasgow either for that matter; it is absurd, because the interest of those bodies in medical education, and their knowledge of it, is ten times as much as that of the University of Oxford or Cambridge either can be.

216. I suppose that, as a rule, either the University of Edinburgh or the University of Glasgow has more medical students than Oxford, Cambridge, and Durham all together?—Of course it has. But I would say, moreover, that I think the present mode of representing the Universities is peculiarly objectionable; that is to say, bracketing them two and two.

217. You are bracketed with St. Andrews, are you not?—Yes, we are bracketed with St. Andrew's in that way, and with Aberdeen for the Parliamentary representation. I think that is peculiarly objectionable, because it tends just to set the two Universities considering how they are to get a man time about, or how it is to be done; I think the far better way, if they are not to be separately and individually represented, would be for the four Scotch Universities to be represented in solidarity; that is, to give them as many members as you think right to give them, and let the whole four Scotch Universities concur in the appointment of those members.

218. You are aware, are you not, that a suggestion has been made to us that the Council should be formed of representatives of the three branch Councils, one for each kingdom?—I observed that in Mr. Simon's evidence; and Dr. Struthers, I think, alluded to it to-day.

219. Have you formed any opinion upon that?—I think it is a plan that is quite worth thinking over. I have not formed a definite opinion about it, but it strikes me that it is a good plan for diminishing the members of the Council yet preserving its efficiency.

220. Supposing that the principle of direct representation was admitted it would be done too, with great ease, by sending direct representatives to the branch Council, would it not?—Yes. You might, for instance, have the Scotch medical men sending direct representatives to the Scotch branch Council who would have a fair share of influence there, and you might give them a larger number in that case, and English medical men might send direct representatives to the English Medical Council. I have not reflected on the matter sufficiently to see if it is the right way. I think the way proposed in some of the Bills is to have a vote of the whole profession in the three kingdoms, so that they might all be represented in the General Medical Council, but if you cut down the numbers in the General Medical Council by such a proposal as you were referring to just now, the general medical profession could not expect to have so many members to represent them.

221. How is the member for Glasgow and St. Andrew's appointed now?—Simply by negotiation and caucus; simply by talking it over among ourselves.

222. Who appoints him?—The Senators of each University.

223. Is that the case with other Universities?—Yes.

224. In each case it is the Senate, is it, that is the electing body?—Yes, and any other way would be impossible in Scotland.

225. Supposing that the Senate of Edinburgh

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and the Senate of Aberdeen disagree, they would have to be shut up together till they did agree, I suppose?—No, the ultimate resort is that if they disagree entirely the Privy Council nominates and appoints. I think that is a very bad system.

226. Do you know whether there has been any case lately in which the Senates of the two Universities have disagreed?—Yes; last year they did disagree and the Privy Council did appoint.

227. Would you interfere with the present Crown nominees?—No, I should not be disposed to do so.

228. What is your opinion with regard to what might be considered a great evil in the present state of things; that is to say, the admission on to the register of persons having only one qualification?—As to that I think we are unanimous in Scotland. If the one-portal system only meant that nobody should be admitted to the register, except upon a complete qualification, we should be all absolutely unanimous.

229. Is there any Scotch degree at all given for only one qualification now?—There is no such thing in Scotland, nor has there been within my recollection. Practically, the legal power of granting a one-sided qualification exists, that is to say, the College of Surgeons has the only legal power of giving a qualification in surgery.

230. Do you mean to say that there are no practitioners in Scotland who have merely got the certificate for surgery?—I mean to say that, in point of fact, for half a century, or, to be quite safe, I will say for 30 years, there has been no instance in Scotland of a man being sent out, whatever be the legal character of his qualification, without a complete examination in all departments.

231. Then you would be quite in favour of legislation to the effect that no registered practitioner should be simply a qualified surgeon or qualified physician?—Certainly.

232. Just referring to the case you have mentioned of the two Senates of Edinburgh and Aberdeen, having each of them a member for the Council, being unable to agree, and the Privy Council having to decide, I think that is a case which is mentioned in an Order of the Privy Council of the 7th of December 1878?—Yes.

233. With regard to Scotland, do you think that there is any conflict of interest between the Corporations and the Universities?—The Corporations and the Universities have their several interests, no doubt, and in some instances they have had squabbles, and have been more or less opposed, but in substance and reality I do not think there is any opposition whatever: that is to say, I think that the Corporations, if they are well conducted and aiming at a good result in medical education, strengthen the Universities, and the Universities strengthen the corporations. I would take the case of the College of Surgeons of Edinburgh and the University of Edinburgh as a very peculiar case in point. The College of Surgeons of Edinburgh has often appeared to have interests opposed to those of the University, and the University has often had disputes with the College of Surgeons, but as I have been cognisant of all these matters for 30 years at least, and my father before me was a medical reformer in the College of Surgeons for the whole of his professional life, I think I may say that the whole of those disputes have tended to good, and

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the pre-eminence of the Edinburgh University is, in my opinion, very greatly due to the influence of the College of Surgeons upon it, and *vice versa*.

234. Just take a student of the College of Surgeons; he gets the certificate of the College of Surgeons; how, practically, does he generally get his certificate for medicine?—In order to get the certificate for surgery, he has got to be examined in medicine and in midwifery, and clinically both in medicine and surgery. Even years before the conjoint board or the conjoint examination was ever talked of, the College of Surgeons never passed a man, or gave a license to a single man, without examining him in medicine.

235. At the present time the College of Surgeons, before they give a diploma, get the assistance of other examiners with regard to medicine, do they not?—Yes, certainly.

236. Is that peculiar to Scotland?—I can go the length of saying that England in this respect is alone among civilised countries; there is no civilised country in the world except England where it has been quite the habitual thing for a man to go out with a license in surgery and not to be examined in medicine, or midwifery, or *materia medica*, and there are hundreds of such men in the country now. Mr. Simon told you himself that he was one of them; Mr. Simon never was examined in medicine; he never was examined in midwifery; he never was examined in *materia medica*; but Mr. Simon has, nevertheless, been a most able public officer, and has given out laws about measles and scarlet fever to guide the whole kingdom as medical officer of the Privy Council.

Lord George Hamilton.

237. In addition to being for many years Professor of the Glasgow University, you have had a very large practice, and, no doubt, are pretty well acquainted with a large number of the medical men who are practising in Scotland?—Certainly.

238. You have, I think, stated very clearly to the Committee what disadvantages, in your opinion, would occur from what, as you term it, the double examination; it would tend, I suppose, to increase the sum which the students would have to pay before they could pass, or become thoroughly qualified to practise?—Certainly it would, and uselessly, in my opinion; it is utterly useless that a student should pay 30*l.* for a legal qualification which he has practically in his degree.

239. With regard to the increase of fees, supposing there was an increase of fees, would that, do you think, materially affect the class or the number of people who go into the medical profession?—It would tend that way, undoubtedly; every increase of expense unnecessarily, and which is obviously and positively unnecessary; every merely legal loading of the expenditure upon the student's education tends to prevent men from going into the profession, and that again tends to produce quacks; if you limit the number of the profession you most certainly set up quacks outside it.

240. Then you have a double fear first, as I understand, that if there was this double examination the student's mind would be diverted from the course of instruction through which they would have to pass at the University of Glasgow, and

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and I suppose also you are afraid that a considerable number who now go to the Glasgow University would not go there at all?—That is our idea, that it would tend to divert men from the higher quality of education into the lower.

241. That is, as I understand it, not an objection which you put forward, merely as connected with the Glasgow University, but you put it forward on general grounds that you think a considerable number of people who now have all the benefit of a University training, would endeavour otherwise to acquire the knowledge that they thus obtain?—Precisely so.

242. And under circumstances less favourable to their general training?—Yes; less favourable on the whole, and especially as regards the elementary biological sciences, which we in Scotland regard as the basis of the whole University training.

Mr. Mitchell Henry.

243. Do you wish to convey to the Committee that the diploma of the College of Surgeons of England is to be obtained without an examination in medicine?—I do not, because I believe of late years they have instituted an examination in medicine; but it is to be obtained now without an examination in midwifery, as Sir James Paget told you the other day, and what I stated was simply the fact, that there are hundreds of men now practising who have never been examined in medicine, and who are now busily engaged in daily treating all sorts of medical diseases; and that state of matters, I believe, does not exist in any civilised country under the sun except England.

244. Are you aware how many years it is since Mr. Simon became a member of the Royal College of Surgeons?—No.

245. You are therefore referring to a case that occurred 44 years ago?—Clearly, but still the thing exists as far as midwifery is concerned; that there is no examination in midwifery at this moment, I believe, unless it has been instituted since Sir James Paget gave his evidence here.

246. Are you satisfied with the fact that there should be seven licensing bodies in Scotland qualified to give licenses to practise?—I see no harm in it provided that these licenses are properly inspected and looked after by the Medical Council.

247. Then you are of opinion that there is no competition downwards amongst those seven bodies?—I do not think so; I think the competition downwards is a delusion in the main, and is very easily cured by a proper system of inspection.

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248. Your previous answer was that there is no competition downwards as between the Universities; you now wish in answer to the honourable Member for Galway to state that there is no downward competition as between the seven bodies?—Of course I cannot presume to speak so well of them, because I am not, in fact, an examiner for any of those bodies, but I believe that the idea of competing downwards has been grossly exaggerated; and although there may have been faults, and I have no doubt there are faults, I think they could be rectified without any such engine as this new machinery which was proposed, and in the main (I think Sir James Paget brought this out in his evidence) the whole tendency of

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the last 20 or 30 years in all the bodies has been upwards and not downwards.

Mr. Mitchell Henry.

249. Do you make in your own mind a distinction between education and the license to practise?—I do.

250. Do you think that the body which gives the education should also be the body to give the license to practise?—I have taken some pains to explain that that is the system of the Scotch Universities, and that it is in the Scotch Universities a most valuable part of the discipline; that the discipline of the student is very largely aided by the fact that he gets his qualification from the body that teaches him; I believe it is a most wholesome state of matters.

251. Then do I gather that you think it desirable that a man should depend upon his own teachers for his qualification for practice?—Not absolutely depend upon his own teachers; I see no objection to the appointment of other examiners; and as I have said, I am willing that there should be any number of examiners appointed to co-operate with the teachers; but I say that the proceeding of the qualification from the university which teaches, is a most important part of the discipline, and a most important part of the security for good education.

252. Do you think it would be a desirable thing in the interest of the public, that there should be one examination for the license to practise in Scotland by the association and fusion of the seven licensing bodies, and that there should be a similar body for England, and a similar body for Ireland?—I do not think so at all. I am opposed to this scheme altogether.

253. Then do you think that it is desirable that we should still continue to have 19 bodies giving licenses to practise medicine and surgery?—I think those 19 bodies should be subject to control and inspection, but I do not see any objection to the mere number of them. In Germany you have 20 bodies, as Professor Turner showed you.

Mr. Wheelhouse.

254. You said in reference to a question which was asked by the Right honourable Chairman some time ago, that as far as the Universities were concerned, there had been rather an erroneous impression conveyed, you thought, with regard to the University examining bodies not granting degrees by the mere fact of a person going up to the University to receive them; assuming that to be so with regard to the University, is there no place in Glasgow to which an Englishman may go, and going, get the diploma of that particular body without any previous residence within its boundaries?—I believe that in all Corporations, whether in Scotland, England, or Ireland, no residence is required at all; there is no such thing as a Corporation requiring residence.

255. Is there no body somewhat similar to our College of Physicians in England, by going to which in Scotland, Glasgow, or Edinburgh, or anywhere else, to your knowledge, any person so going may receive the diploma of that particular body without either residence or examination?—There is a Corporation in Glasgow, the Faculty of Physicians and Surgeons, which, like all other Corporations, grants a diploma without residence.

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residence. The question whether it gives this diploma upon inadequate terms is a question of detail which I cannot answer, but in respect of the form under which it admits to the diploma it is precisely similar to the other Corporations in that respect in not requiring residence.

256. I do not wish to ask beyond just one matter of detail, with regard to that diploma, but how is the diploma from the Faculty of Physicians and Surgeons in Glasgow granted?—It is granted only after examination; I forget whether it is two or three examinations, but it is granted after a series of examinations.

257. The postulant goes up, does he not, to that particular College or particular Corporation, and he asks to be admitted to its diploma, subjecting himself to an examination?—Yes, he puts in a schedule of education, and he gets it scrutinised; he proves that he has passed a preliminary examination in general education, and then he asks to be examined, and he is examined, first in anatomy and surgery, and all the rest of it, and then in anatomy and physiology, and all the rest of it, and then there is the final examination. I really cannot tell you, at this moment, whether it is two or three, but he passes a series of examinations, and he gets his diploma.

258. What is that diploma when it is obtained?—It is a surgical license, not a medical license.

259. Would it entitle him to be put upon the register?—Yes.

260. Have you any idea what is the fee for his obtaining that diploma?—I am afraid that I cannot answer these questions; I have not had to do with it.

261. With regard to your view, that the best way would be to bring the one portal to you, do you mean that the gentlemen should go to you, and that you and they conjoined should examine upon the same principle as the German Universities?—I only know it by Professor Turner's evidence; but as I understand the matter, the present state of the Staats Examen in Germany is very much what I would be inclined to support, with one exception, by the way: I think Professor Turner put it thus, that the Staats Examen on the one hand, and the degree examinations on the other, form a double series of examinations, going over nearly the same ground, and by nearly the same examiners; that there is one bureau which requires it to be done in one way and another bureau that requires it to be done in another way; now that is very objectionable, and what I should think much better is that the examiners of both kinds should concur in a certain line or set of examinations, and give one degree, carrying also a license to practise.

262. Would not that virtually cut at the very root of your idea of a conjoint scheme in itself?—Certainly, and I want to cut at the root of it; I think the idea is bad.

263. You told us, did you not, that the students were very fair in their attendance when they knew that no roll was to be called by you?—That applies only to the clinical class.

264. Is it a desirable thing to have no roll-call under any circumstances; would not it be desirable to have a roll-call at all times?—I am afraid I can hardly have conveyed the whole of what I meant with respect to that; the clinical class is totally distinct from any other class in this respect; the other classes consist purely of lectures; the clinical class consists of two lec-

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tures a week, and three or four visits to the wards, which visits to the wards are made as instructive to the pupils as they can be, consistently with attending to the interest of the patients. My remark was that nearly as many pupils attend the visits to the wards when they are not subject to a roll-call as attend the lectures where they are subject to a roll-call.

265. You merely made that observation with regard to the bed-side part of it?—Merely as to the bed-side part of it.

266. You spoke just now of there being no grinding in Scotland; are you not aware that there are provincial schools in England where there is no grinding?—I am very glad to hear it; but then their grinding is all done in London. A man in Leeds, who goes up to the London Boards, takes his grinder in London; he does not take his grinder in Leeds.

267. Are you not aware, as a matter of fact, that men sent from Leeds, and from any of the other provincial medical schools in England, very often go directly through the examination without having any grinding at all?—I should be very sorry to think that it is otherwise. In a well-taught school there ought to be a considerable number who can go up to be examined without grinding; but what I say is, there is a tendency to raise grinding into an importance that does not properly belong to it, and does not belong to it in Glasgow.

Dr. *Lyon Playfair*.

268. I am afraid there is still a confusion in some of our minds about Glasgow; is it not the case that the Corporations in Scotland have altogether voluntarily formed a conjoint Board?—It is.

269. And that therefore there are not those seven independent examining bodies to which the honourable Member alluded?—Practically not.

270. Because Glasgow unites with Edinburgh in the conjoint examination?—The Faculty of Physicians and Surgeons unites with the College of Physicians in Edinburgh, but then they do not give up the power of giving their separate diplomas.

271. But they give the diplomas now after a separate examination, not after a conjoint examination?—Each body retains the power of giving its own diploma separately. For example, if a University graduate goes to the Edinburgh College of Surgeons, the College of Surgeons will give him a surgical diploma apart from the College of Physicians.

272. But not without examination?—No, not without examination.

273. And that examination would be a conjoint examination?—No, it would be a complete examination, but it would not be conjoint in the sense of combining with the examiners of another Board.

274. There is a conjoint system in Scotland; the College of Physicians and the College of Surgeons in Edinburgh join together to give a double examination qualifying by one conjoint examination?—Yes.

275. I mean that they would give a single qualification if it is asked for?—Yes, if it is asked for, but I qualify that by this, that even a single qualification in Scotland always implies a double or, at least, a complete examination. In the examination

Dr. *Lyon Playfair*—continued.

aminations for the College of Surgeons, the single qualification is just as complete really, though not legally, as the conjoint qualification of the College of Surgeons and College of Physicians double qualification.

276. Do not you think it would be a desirable thing that a double qualification should always be given before a man is allowed to practise?—Certainly, I have said so. I think that a Medical Act which should decline to admit on the register any man who has not got a complete qualification would be perfectly unexceptionable.

277. Are you aware of the conjoint scheme as it was arranged by the different bodies in England?—I am acquainted with it to a certain extent.

278. Are you aware that the Committee of Reference, which is another name for a conjoint Board in London, are required to nominate double the number of examiners, and that they are afterwards to be registered?—Yes, I am aware of that.

279. And are you aware that the Corporations themselves are to select the examiners from this double nomination?—I did not know that fact until this morning, but I believe it is so, so far as I have been able to look into the question.

280. Do not you think that if the same system was followed in Scotland, and that if the Medical Council were to nominate double the number of extra-academical examiners, that the Universities might select the examiners out of this double number recommended by the Medical Council?—Yes, provided they came to the University centres; that is the difficulty.

281. And then they would have to co-operate with the University professors?—Yes, they might come and act like our non-professorial examiners to such an extent as the Board may require.

282. But you have no objection to give the Board security if it is desired that the extra-academical examiners should be nominated by the Medical Council and not by the University?—I have no objection to that whatever, except that when you say not by the University, I suppose you would not throw our University Court, which at present appoints our examiners, altogether out of consideration.

283. No, what I meant was, that however selected the examiner is to be found and nominated by the Medical Council?—Precisely so. I am not entitled to speak for the Court, but I do think that the Court would object to be tied up so that it was absolutely bound to appoint one man. I do not think that there would be the same objection to the Court selecting out one of a number of men nominated by the conjoint Board or the Medical Council.

Dr. *Cameron*.

284. As I think there has arisen some little misapprehension regarding the actual state of matters in granting single qualifications, it might be well to ask you still further upon the matter: are you aware that last year the College of Physicians of Edinburgh granted 115 licenses in medicine alone?—I was not aware of that, because I am not at all cognisant in detail of the proceedings of the College of Physicians, but I am thus far aware of what the College of Physicians does, that every one of those licenses would represent an examination in every department, including surgery.

0.68.

Dr. *Cameron*—continued.

285. Will you take that Table (*handing the same to the Witness*), and from it give the number of licenses given by the Faculty of Physicians and Surgeons in Glasgow?—Thirty-four.

286. How many were granted by the College of Physicians?—There were 114 licenses of the College of Physicians and 34 of the Faculty of Physicians and Surgeons of Glasgow. The 114 physicians' licenses rank in the Medical Register as a physician's qualification, and of the 34 Faculty of Physicians and Surgeons' licenses rank as a surgical qualification; but I know sufficient of the state of matters to say that every one of those licenses, whether ranking as medical or surgical, implies a complete examination in medicine, surgery, midwifery, forensic medicine, and a great many other things.

287. To clear up that point, which I see troubles the honourable Member for Leeds, the conditions on which licenses are granted by the Glasgow Faculty of Physicians and Surgeons, you find in Churchill's Medical Directory the rules which regulate the examination in the case of persons who have already passed a first examination at the hands of some other licensing bodies; would you read them?—Candidates for the diploma of the faculty who have passed the examination in anatomy, physiology, and chemistry, before any of the licensing bodies enumerated in Schedule A. of the Medical Act, on complying with the regulations in other respects, are admissible to the second professional examination.

288. Then will you read a little further down the conditions with regard to persons who have passed the second examination?—"Graduates in medicine of any British University, and licentiates in medicine of any of the licensing bodies authorised to grant diplomas in medicine, are exempted from examination in medicine and materia medica, and subjected to all other parts of the final examination."

289. So that it appears that in no instance is there omission of examination made by the Glasgow Faculty of Physicians and Surgeons except in the case of those who have submitted to an examination at the hand of some other licensing bodies?—I presume so; I know those rules now for the first time; I never read them before, but I have no reason to doubt that that is the actual state of the case.

290. And in that respect the Glasgow Faculty of Physicians and Surgeons is on the same footing, is it not, as the English licensing bodies?—I should think very much the same, except that I believe the Royal College of Surgeons of England does not admit any licentiate without going through the whole of its own examinations. I rather think so, I am not quite positive about it.

291. But this examination is not so comprehensive as you have stated, that of the Glasgow Faculty of Surgeons and Physicians to be?—No, it is, or used to be, what we should call in Scotland a half examination.

292. You brought out one important point, did you not, and that was, that students intending afterwards to practise in England, must almost as a matter of course submit to the English conjoint examination under the Bill?—Not precisely so; there would be nothing illegal in a student passing all his examinations in Scotland, getting his certificate from the Scotch conjoint Board, and joining a Scotch College, and yet practising in England. What I said was, that

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Dr. Cameron—continued.

there would be a great tendency produced by that state of the law, for an English-born student who means to practise, let us say in his own native country, or under his father's eye in England, there would, I say, be a great tendency with all such students to think that they must not go to a Scotch University, because they would think as a matter of course of joining an English College, and therefore they must pass the English conjoint Board.

293. That amounts practically, does it not, to what I said, that if they wish to avoid prejudice, and put themselves in the best position, they must pass the English conjoint Board?—Yes.

294. At the present moment a man may get the license of the English College of Surgeons, and if he wishes to have a degree in medicine he may afterwards go to a Scotch University, may he not, and complying with their regulations, and take his degree there?—Yes, but he must comply with our regulations, and he must go through the whole of our three or four examinations.

295. Do not you consider it a great practical advantage to a medical student to have to undergo his education in different places in that way, in London to a certain extent, and in Glasgow and Edinburgh afterwards?—So much am I of that opinion that I for one personally should be very glad if an arrangement were made that the Universities would admit each others' examinations up to a certain point. I do not give it as the opinion of the whole of my colleagues or of the University generally, but that is personally my opinion. I think facilities should be given to students to pass from one University to another. but I think it would be hardly safe to extend it all the other Corporations.

296. As to the reasons which induce English licentiates to go to Scotland for a medical degree; is not the chief reason the fact that they cannot get the degree of M.D. at the English Universities without having graduated in arts?—Yes, I think that is one reason, at least.

297. So that it is not owing to any superior ease in obtaining the degree in Scotland, or to any inferiority as it has been suggested, that they go to Scotland instead of here?—I do not think there is any inferiority. I think that the degrees of London, Cambridge, and Oxford are, as far as they go, first class; but I think that the Universities in England have thoroughly failed in their duty to the medical profession in not taking in hand the general practitioners' education, and not looking after the schools. There is no teaching University, and there ought to be a teaching University in England. The University of London, in my opinion, ought to be a teaching University, not a mere examining one.

298. You have told us what a man has to do to get the license of the College of Surgeons in London and the degree of doctor of medicine from some Scotch University under the present system, he has to submit to two examinations, to study according to a certain curriculum, and to put in an *annus medicus* at a Scotch University; that is all, is it not?—Yes, he must have one at one University, and another at another University, and the rest of his education at any school or under any teachers that are recognised.

299. But under the new system proposed in this Bill, would he not have to pass the conjoint Board of Scotland in order to obtain his degree

Dr. Cameron—continued.

from a Scotch University?—Not in order to obtain his degree, but to give his degree legal effect as a license to practise, and to admit him to the register; he might get his degree, but that degree would not admit him to the register unless he passed the conjoint Board.

300. So that he really would have only one extra examination to pass in order to practise in England?—Yes, the examination of the conjoint Board in England.

301. You propose that the portal should come to you; that the Medical Council should send assessors, or assistant examiners, to take part in your examination; how do you propose that the expenses should be defrayed?—That is a difficult question. I must tell you at once that the Scotch Universities are very poor, and they have not the means of paying for those luxuries which you wish to force upon them. They have, with great difficulty, got this system of non-professorial examiners into operations, and that difficulty consists simply in finding remuneration for them. We have not got a sixpence to bless ourselves with for such purposes, and therefore if you wish to carry this, and to get our system reinforced in this way, to which we have no objection, I think you ought to help us in the pecuniary part of it.

302. Do you not think it would be a fairer plan to expect the Government to find the necessary expenses than to call upon the whole of the poor students to pay much more heavily for their qualifications than they now have to do?—Certainly, I think it is one of the greatest objections to the conjoint Board system that it makes the student pay heavily for the behoof of the corporations, and so lays on a legal tax, not for the necessary expenses of the examination, but for another purpose altogether.

303. You have spoken about the examinations of your Scotch Boards, including both medicine, surgery, and midwifery; what is your opinion about the proposal contained in several of the Bills before the Committee. I think in all of them, that no man shall be admitted to the Medical Register without a license in medicine, as well as in surgery?—I have said that I am entirely in favour of that. I am entirely in favour of breaking up the present anomalous state of things whereby single qualifications may be granted on half examinations.

304. What have you to say about the University double qualification?—The Universities have already the power of giving a double qualification, that is to say, the degree of M. B. and M. C., and I have not the least objection to its being made statutory, that they shall not give those two degrees separately.

Mr. Errington.

305. You were asked whether you approved of the 19 licensing bodies; and I understood you to say that you did not disapprove of the number of bodies provided they were kept up to a proper standard?—Yes, I do not think that the number is an objection.

306. You would not consider the existing number by any means too great provided that each body was kept up to a proper standard?—Exactly so.

307. Would you not rather be of opinion that the number of bodies would be a great advantage

Mr. Errington—continued.

on account of variety, both in the education, and in the after examination?—I have often said so. I do not say 19 in particular, but I think having a number of different licensing bodies is of great advantage in a rapidly extending science like medicine and surgery.

308. Then you would approve of variety between the Universities and the examining bodies, as well as between the various Universities, and the various licensing bodies themselves?—Certainly; provided they are kept up each in its place, to its proper standard; I approve of variety.

309. Now, of course, the conjoint scheme would entirely do away with that variety?—Exactly; it would do away with that.

310. While your plan of bringing the one portal to Glasgow would leave untouched those differences and varieties?—Yes, I would leave the vitality and independence of those bodies as much untouched as was possible consistent with efficiency.

311. And the variety of the fees also?—Yes.

312. According to your plan, I presume the assessors, as you suggest, would merely be a sort of check upon the examination going too low; they would not prevent the examination rising to a higher standard than was really necessary?—Precisely so; and I am perfectly satisfied that, as matters stand now, they would be no check at all because they would not be required, but they would be most important support to us in our duties.

Mr. Arthur Mills.

313. With regard to the fees charged at the University of Glasgow; what are the fees that are now charged?—They are quite the same in all the Scotch Universities; what Mr. Turner has told you upon that subject, applies to all the Scotch Universities; I mean that the fees for graduation are uniform.

314. With regard to a question which was put, and which is in our notes of the evidence, to Dr. Acland; it was a question put by the honourable Member for Leeds; Dr. Acland was asked, "Is it true that a gentleman who can go with his credentials as a surgeon from England to Glasgow can receive the diploma of the University of Glasgow for the payment of something like 6*l.* or 7*l.*, bringing the M.D. degree back with him?" And his answer was "I do not know that we have any evidence about that." I rather gathered that you took exception to the answer which was then given by Dr. Acland to the question that was put to him; but I did not quite understand what was the exception which you took to it; would you kindly explain that?—The exception I took was that I thought the President of the Medical Council might have known with very little trouble that the Scotch degree costs 15*l.* or 20*l.*, and that it comprises three or four distinct examinations, for each of which a fee was paid of 5*l.*; and therefore he need not have given even the slightest or most momentary assent to such a question as that. I thought it was not too much to presume that the President of the Medical Council knew as much as that.

315. In a subsequent answer, Dr. Acland alludes to the cost incurred by the time which students have to remain at the University, and in that answer he says that as they have to spend 0.68.

Mr. Arthur Mills—continued.

four years in arts, four afterwards in medical study, which was charged for fees, bore but a small proportion to the aggregate expense of the student?—That is quite true.

316. In one of your answers which you gave just now to the honourable Member for Glasgow, I think you said that the English Universities failed in giving medical teaching; you are comparing what was done in Scotland with what was done in the English Universities. Could you give what you consider an instance of the failure of our English Universities in giving medical teaching?—I think the English Universities have taught well whatever they have taught; but there is no English University which, so to speak, exercises the kind of disciplinary control over the entire circle of medical teaching that our Scotch Universities do.

317. You were asked a question by the Right honourable Chairman as to any alteration in the constitution of the Council, and I think you expressed, generally, the opinion that you did not attach much importance to direct representation?—I have not been led by my own feelings to attach much importance to it, but I have great respect for the feelings of others who have.

318. Did you hear Dr. Struthers' examination?—I did not quite follow that part of his examination, but I think he alluded to that idea of three Councils sending deputies to the General Medical Council.

319. And I thought you expressed the opinion that the objection, so far as you thought it was an objection to it, was the excitement that might arise from it?—With regard to a plebiscite, I merely say that is a personal feeling of mine.

320. I suppose the same sort of objection, that a medical parliament would be a bad thing, would apply to the Scotch School Board elections in the election of Members of Parliament?—The same sort of thing.

321. And there might be the same objection to a general election?—Yes; that it would disturb us all in our proper work.

Mr. Lowe.

322. You have suggested a plan by which, as I understand it, examiners might come to your University and examine there; how would you conduct it, or who would, the examination in that case?—In all our examinations the professors and the non-professorial examiners are exactly equal; they each conduct a portion of the examination. I sometimes request the gentleman who sits with me to do the whole, or we arrange it amongst ourselves. Sometimes one of us takes 10 minutes, and the other takes 10 minutes; it is a matter of arrangement.

323. Who are the examiners now with you?—The gentlemen appointed by the University Court.

324. What you would say is that you would see no objection to those persons being sent by the Medical Council?—To their being nominated by the Medical Council.

Chairman.

325. Or any other persons being nominated, not necessarily naming any?—Any persons nominated by them. The idea of the Right honourable Member for the Edinburgh University was, that the Medical Council might nominate more than a sufficient number of gentlemen, and

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Chairman—continued.

and that the University Court might elect their nominees.

Mr. Lowe.

326. Then is it the fact that those persons so nominated would have the whole of the examination, and the decision in their own hands; is that what you propose?—They would sit side by side with the professors, and each would take part, and each would give his verdict, and no man would be passed who would not satisfy both.

327. What is to happen, supposing the non-professorial examiner thinks that a young man has not passed and the professor thinks he has?—They would mark their dissatisfaction in the numbers, and then those numbers would be given effect to.

Chairman.

328. Do you mean to say that if the majority of this conjoint Court decided against a man he would not get his certificate?—He would not pass. Practically it would come to this, that no man would pass that did not satisfy them all.

Mr. Lowe.

329. There are only two people, as I understand?—Then he would not pass if he did not satisfy both.

330. If either of them were dissatisfied the man would not pass?—Just so.

331. Do I understand that you are in favour of having an examination before granting degrees; do you think that a good principle?—Certainly.

332. With regard to granting degrees upon examination, are you aware that a hundred years ago, in the University of Oxford, there was no examination at all?—Yes; but that is an extinct state of things.

333. You are in favour of having examinations?—Certainly. I trust my evidence shows that I am not only in favour of them, but in favour of having them more rigid.

334. May I ask why you are in favour of them?—Because I think that the influence of examinations, properly conducted, upon the training of a student is most important; it is not merely the security to the public, but the influence of them upon the student that I value.

335. Do you attach any weight to their influence as a security to the public?—I do; but I may just allude here to what Mr. Simon said; he was talking about the sovereign being minted, and the impropriety of its being minted at a number of different places. But the sovereign would be a sovereign no matter how many places it was minted at, provided the legal obligations were exactly fulfilled. Now, I fail to recognise the analogy here. The sovereign is a simple and indissoluble thing that ought to have a certain weight, and not to be either above or below that weight; but you cannot make a uniform minimum of medical qualification as you can in regard to the weight of a sovereign; the thing is out of the question; medical education must be varied in its character, and it must change from year to year both as to its substance and as to its quality; and therefore it is not minting the student, but it is making the student, that is to me the all-important thing, and all systems of examination that tend to vitiate the making of the student are bad; which is my radical objection to the conjoint Board system.

Mr. Lowe—continued.

336. But still you would require that they should come up to a certain standard?—Undoubtedly.

337. Why should you require that?—Adam Smith years ago said that it was of no consequence, and he thought that the Scotch Universities doing as some of them did at that time, granting degrees practically without examination, did not do any harm to anybody.

338. I want to know on your principle why you want an examination at all?—I do not agree with Adam Smith there, because I do not think it is consistent with the dignity of our University to pass men upon those terms.

339. Is that the only reason?—That is my chief reason.

340. Is there not another reason still more cogent, namely, the protection of the public from incompetent practitioners?—Yes, I grant that that is the reason of the whole of this proposed medical legislation and the whole of the licensing system.

341. Then I may take it that you do admit that that is an important element in the matter, at any rate?—Certainly; but it is an element which should not make you lose sight of the other, that the education and training of a student are even more important than the examining him once at the end of his course.

342. If it really is important that the public should be protected, how can you justify to yourself having the number of standards which you have got?—Because I think it is impossible to have equality; I do not believe in equality or uniformity, and I do not think they are even possible; I think all you can do is to secure in the nearest and most practical way that there is no gross incapacity; that there is a certain amount of training and discipline, and attention.

343. Then you admit that it is impossible to have anything like equality in these matters on your plan?—I do not think it is possible on any plan; I know of no plan on which it is possible to have equality.

344. Is not the fact of introducing into the examination a person who has been teaching the young man, and who has an interest in his passing, an unnecessary violation of equality, introducing a disturbing element more likely to make the inequality greater than it otherwise would be?—It is a testing element in the right direction, because the teacher always tends to exact more from his student than the extra-professorial examiner.

345. The teacher has his reputation at stake in the matter, and is more likely to be lax than a man who has no interest in him?—That is not practical experience. Practical experience is that a teacher almost always tends to elevate the quality of the examination. In the returns I have just handed in it will appear that our teachers in the elementary sciences rejected 44·7 per cent. of their own pupils; and in one year it was much more than 50 per cent. I would rather say that it is only the teacher who can with perfect confidence combine strictness, or even severity, in examination with justice to the candidate.

346. Then do you think that the rule at Oxford by which we did not admit persons to examine those who had been their own pupils in the schools was a wrong principle?—I think so.

347. How

Mr. *Wheelhouse*.

347. How is a man who has been educated in a school which is not a University to get a diploma or a degree, supposing always that you confine it to a University?—I do not wish it to be confined to a University.

348. How is a man to be educated at a school which is not a University, supposing that your plan of affiliating him on to a University is carried out?—He would still be able to go to his

Mr. *Wheelhouse*—continued.

college and get his diploma there; my plan does not in the least interfere with that.

Dr. *Lyon Playfair*.

349. You said that you do not think it possible to obtain equality by various examinations; have you any difficulty in thinking that you could produce efficiency, though not equality?—That is my idea; let us have efficiency but not equality.

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Mr. WILLIAM JOHN CLARKE MILLER, B.A., called in; and Examined.

Chairman.

350. You are Registrar of the General Medical Council?—Yes.

351. Have you any returns which you wish to hand in to the Committee?—Yes; they are returns which I was directed by this Select Committee to obtain for its use, and which, with considerable difficulty, I have procured and tabulated in such a form as to present what I hope will be a thoroughly complete and clearly arranged series of data in regard to the inquiry in question. To this I venture to add some connected Papers relating to subjects brought before the Committee last year. The Papers are as follows:—

Paper (A) contains tabulated returns obtained from medical Examining Bodies by the Registrar, pursuant to instructions given to him by the

Chairman—continued.

House of Commons Select Committee on Medical Bills, showing in detail how far the regulations and practice of such bodies, at their several examinations, are in accordance with the General Medical Council's recommendations on education and examination (*delivering in the same*).

Paper (B) contains the Proceedings of the Executive Committee of the Medical Council, in reference to the corrections of the Medical Register (*delivering in the same*).

Paper (C) is a return of cases, with counsels' opinions thereon, with respect to the Registration Clauses of the Medical Act, 1858, together with other documents setting forth certain apparently insuperable difficulties in regard thereto (*delivering in the same*).

Mr. *Miller*,
B.A.

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A P P E N D I X.

Appendix, No. 1.

PAPER handed in by Professor *John Struthers*, and referred to in his Evidence, Q. 34.

MINUTE by the MEDICAL FACULTY in regard to the MEDICAL ACT AMENDMENT BILL, as amended on Report. Appendix, No. 1.

University of Aberdeen, 24 May 1870.

THE Medical Faculty having had under consideration the "Medical Act, 1858, Amend-Bill (as amended on Report)", regrets to find that the Bill will have the effect of discouraging university graduation and of injuring the usefulness of the universities, unless provisions are introduced to prevent these results.

The Faculty is of opinion that the evils complained of, in regard to some of the existing modes of admission to the medical profession, admit of being remedied without legislation by the voluntary combination of the Colleges of Physicians and Surgeons, for which due provision is made in the Medical Act of 1858; and that, if legislation be had recourse to for the purpose of rendering complete in each division of the kingdom the mere license to practise, it is not necessary, and would be unjust, in doing so, to subject those who desire to enter the profession by the higher education and examination of the universities to the expense and inconvenience of having to take a minimum qualification in addition to their university degrees.

In the Bill, however, there is no recognition of this important distinction, for under Clauses 3 and 13, no one can be admitted to the medical register who has not received the license of one of the proposed Medical Examining Boards. Although the proposed examination will necessarily be a *minimum* examination, as that which the least educated members of the medical profession had been able to pass, it will, if this Bill be allowed to become law in its present form, be forced, with its attendant expenses, on the university graduate, who has already had a longer, a higher, and a more expensive education, and passed a higher examination both in general and professional knowledge, than that required for the mere license to practise. The Faculty complains of this as inflicting an uncalled for and grievous hardship on university students, and maintains that, whatever arrangements may be made in regard to conferring the mere license to practise, university degrees in medicine should continue to entitle their possessors to admission to the register, and that it would be reasonable and just were a clause to that effect inserted in the Bill.

The Faculty is aware of the agitation which has recently arisen advocating what has been termed the one portal system of admission to the medical profession, and while the Faculty adheres to the opinions above expressed, it is willing to make a concession to the advocates of this system, as propounded in the Bill, on condition that care be taken to secure that the inconvenience and expense, which in any form it must occasion to university candidates, be reduced as much as possible; and this view of the Faculty would be met by a provision being introduced into the Bill whereby candidates who had passed the university examinations in the accessory and fundamental sciences of medicine would be entitled to admission to the final examination of the Board on payment of a small fee.

The Faculty regrets to find that the efforts hitherto made on the part of the universities have not been successful in obtaining the introduction of such provision in the Bill, and considers that Clause 9, Section 5 (which remains as in the original Bill), and Clause 10, Section 2 (which has been introduced into the Bill as amended on Report), do not give such securities as the universities ought to have before they consent to relinquish in any form the right which their degrees confer of entitling their possessors to entry on the medical register. The security which the Faculty desires would be given by the introduction of the following provision, as a substitute for Clause 10, Section 2: "Candidates for admission to the examination who are also candidates for university graduation, and have passed the examination or examinations conducted by the university on the accessory and fundamental sciences of medicine, including chemistry, natural history, botany, anatomy, and physiology, shall, on their having completed the curriculum of study required for examination by the Medical Examining Board, be entitled to be admitted to the final examination of the Board on payment of a fee not exceeding five pounds."

Unless such a provision, giving security in regard both to the acceptance of these portions of the university examinations, and to the payment to be made by university candidates, be introduced into the Bill, the Faculty is of opinion that the Bill ought not be accepted.

Appendix, No. 2.

PAPERS handed in by Professor *Gairdner*, 8 March 1880.

Appendix, No. 2.

NUMBER of STUDENTS in the FACULTY of MEDICINE, Matriculated in GLASGOW UNIVERSITY, in each Year from 1861, Onwards.

Session 1861-62	-	-	283	Session 1871-72	-	-	349
„ 1862-63	-	-	294	„ 1872-73	-	-	346
„ 1863-64	-	-	267	„ 1873-74	-	-	342
„ 1864-65	-	-	259	„ 1874-75	-	-	367
„ 1865-66	-	-	272	„ 1875-76	-	-	415
„ 1866-67	-	-	283	„ 1876-77	-	-	435
„ 1867-68	-	-	323	„ 1877-78	-	-	492
„ 1868-69	-	-	324	„ 1878-79	-	-	501
„ 1869-70	-	-	336	„ 1879-80	-	-	560
„ 1870-71	-	-	320				

NUMBER of CANDIDATES at each PROFESSIONAL EXAMINATION in MEDICINE from 1874-1879 (as by Detailed Return of each Year submitted to the Medical Council), showing the Number Passed and Remitted, and the Proportion of the Remitted to the whole Number of Candidates.

[*N.B.*—The *fourth* professional examination, arising out of a re-arrangement in 1877, has as yet only been completed by two candidates, both of whom passed. It is, therefore, for the purpose of this Return, included along with the third professional.]

1874-79.	Candidates.	Passed.	Remitted.	Proportion Remitted.
<i>First</i> professional - - - -	845	456	389	44·7 per cent.
<i>Second</i> professional - - - -	568	375	193	34 „
<i>Third</i> professional, and final - -	414	334	80	19·3 „

Appendix, No. 3.

PAPERS handed in by Mr. *William John Clarke Miller*, B.A., 10 March 1880.

PAPER (A.)

TABULATED RETURNS from MEDICAL LICENSING BODIES showing how far Appendix No. 3.
their Regulations and Practice are in accordance with the RECOMMENDATIONS of the
GENERAL MEDICAL COUNCIL on EDUCATION and EXAMINATION.

* * In the following Tabulated Returns, drawn up by the REGISTRAR of the MEDICAL COUNCIL in accordance with instructions received from the House of Commons' Select Committee on the Medical Act (1858) Amendment Bill, the heading contains, *in extenso*, the WHOLE of the General Council's "Recommendations on Education and Examination," as formulated and codified by the Council in the latest yearly edition for 1879 (excepting only those that are merely instructions to the Registrar); and under each such "Recommendation" there is set forth, *seriatim*, authoritative statements by the several Medical Licensing Bodies (specified in order in the left-hand column) as to how far their Regulations and Practice are in accordance therewith.

In order to make the Table as clear and complete as possible, the Statements of the Medical Licensing Bodies—which have been revised by these Bodies, in proof, after tabulation—are arranged in the following three Groups, the entire series of Recommendations being, for facility of reference, repeated at the head of each Group:—

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|---------------------------------------|---|---|---|---|------------|
| I. English Medical Licensing Bodies | - | - | - | - | pp. 32-41. |
| II. Scottish Medical Licensing Bodies | - | - | - | - | pp. 42-51. |
| III. Irish Medical Licensing Bodies | - | - | - | - | pp. 52-61. |

TABLE showing how far the REGULATIONS and PRACTICE of MEDICAL LICENSING BODIES on EDUCATION

I.—ENGLISH MEDICAL

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS - - -	That it be recommended to the Licensing Boards not to accept the Certificate of proficiency in General (Preliminary) Education from any of the bodies, the names of which are contained in the list annually circulated, unless such Certificate testify that the Student to whom it has been granted has been examined in the following subjects :—(1) English Language, including Grammar and Composition; (2) Arithmetic, including Vulgar and Decimal Fractions; (3) Algebra, including Simple Equations; (4) Geometry, First two books of Euclid, or the subjects thereof; (5) Latin, including Translation and Grammar; (6) Also one of these optional subjects—Greek; French; German; Elementary Mechanics of Solids and Fluids—meaning thereby Mechanics, Hydrostatics, Pneumatics, and Hydraulics.	That it is desirable that the Examination in General Education be left to the Universities, and such other Bodies engaged in General Education and Examination as may from time to time be approved by this Council; and that it be delegated to the Executive Committee to communicate with the Licensing Bodies on the subject.
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I (A).—ANSWERS FROM ENGLISH

ROYAL COLLEGE OF PHYSICIANS OF LONDON	Conformable - - - - -	Conformable - - - - -
ROYAL COLLEGE OF SURGEONS OF ENGLAND.	Conformable - - - - -	Not conformable, the Council of the College having deferred the consideration of this Recommendation, pending the result of the proposed establishment of a Conjoint Scheme.
APOTHECARIES' SOCIETY OF LONDON -	This recommendation has always been strictly adhered to; and in fact the Preliminary Examination in Arts, including all the provisions expressed above, was instituted by the Court of Examiners of this Society so long ago as 1850, and has been continued ever since.	The Court of Examiners of this Society does not now examine in Arts; the duty being confided to a Board consisting of Graduates in Arts.

I (B).—ANSWERS FROM

UNIVERSITY OF OXFORD - - -	Conformable, save that (3) and (4) are alternative. It has to be remembered that the standard in Latin and Greek is high, and that no student can count the four years of medical study for the M.B., who has not passed the examination for B.A.	No comment - - - - -
UNIVERSITY OF CAMBRIDGE - - -	The regulations and practice of the University of Cambridge are conformable to this recommendation.	Conformable - - - - -
UNIVERSITY OF DURHAM - - -	Conformable - - - - -	No comment - - - - -
UNIVERSITY OF LONDON - - -	The above syllabus is framed much on the same lines as the Matriculation Examination of the University of London, which, however, covers more ground, requiring four books of Euclid, two out of the following languages :—Greek, French, German, Arabic, Sanskrit, and Chemistry, as well as Natural Philosophy.	No comment - - - - -

are in accordance with the RECOMMENDATIONS of the GENERAL MEDICAL COUNCIL and EXAMINATION.

LICENSING BODIES.

ON EDUCATION AND EXAMINATION.

That it be recommended to the various Licensing Bodies to instruct their Examiners in Professional subjects to report to them any case in which decided ignorance in the subjects of General Education has been displayed by the Candidates, with the name of the Board or Boards before which the Preliminary Examinations have been passed : and that the Licensing Bodies be requested to transmit such Reports to the Registrar of the General Medical Council.	No Medical Student shall be registered until he has passed a Preliminary Examination, as required by the General Medical Council, and has produced evidence that he has commenced Medical Study.	The commencement of the course of professional study recognised by any of the Qualifying Bodies, shall not be reckoned as dating earlier than fifteen days before the date of Registration.	The several Branch Councils shall have power to admit special exceptions to the Regulations as to Registration, for reasons which shall appear to them satisfactory.
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MEDICAL CORPORATIONS.

Conformable - - -	Conformable - - -	Conformable - - -	Conformable.
Conformable. No occasion for any special report has yet arisen.	Conformable - - -	Conformable - - -	The College is not concerned in this recommendation.
The Examiners of this Society have received no such instructions, but in point of fact, if decided ignorance were manifested by the Candidates, the License would not be granted.	The Registration is now conducted by the General Medical Council, whose officers no doubt comply with this Recommendation.	Answer is the same as to the foregoing Recommendation.	This question does not concern the Court of Examiners of this Society, but the Branch Councils.

ENGLISH UNIVERSITIES.

No comment - - -	Conformable - - -	No comment - - -	No comment.
No candidate comes before the Examiners in Professional subjects in the University of Cambridge until after he has been examined and approved by the University itself in the subjects of General Education.	Conformable - - -	Conformable - - -	No comment.
No such cases have occurred at any of our Examinations.	Always done - - -	Complied with - - -	No comment.
The Examiners of the University can, and as occasion arises do, make representations to the Senate as to any palpable deficiencies in the preparation of candidates.	Candidates for a Degree in Medicine must pass the Matriculation Examination before they can commence the course of Professional studies required as a condition of graduation.	No comment - - -	No comment.

TABLE showing how far the Regulations and Practice of Medical Licensing Bodies are in accordance

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS -	The several Qualifying Bodies are recommended not to admit to the Final Examination for a Qualification under the Medical Acts, any Candidate (not exempted from Registration) whose name has not been entered in the Medical Student's Register at least forty-five months previously. In the case of Candidates from other than Schools of the United Kingdom, the Branch Councils shall have power to admit exceptions to this Recommendation.	That the age of twenty-one be the earliest age at which a Candidate shall obtain a license to practise, and that the age shall, in all instances, be duly certified.	That no license be obtained at an earlier period than after the expiration of forty-five months, subsequent to the Registration of the Candidate as a Medical Student.	That the course of professional study required for a license shall occupy at least four years, of which at least three Winter and two Summer Sessions shall be passed at any School recognised by any of the Licensing Bodies mentioned in Schedule (A) of the Medical Act.
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I (A).—ANSWERS FROM ENGLISH

ROYAL COLLEGE OF PHYSICIANS OF LONDON.	Conformable - - -	Conformable -	Conformable -	Conformable - - -
ROYAL COLLEGE OF SURGEONS OF ENGLAND.	Conformable - - -	Conformable -	Conformable -	Conformable - - -
APOTHECARIES' SOCIETY OF LONDON.	This Recommendation is always strictly adhered to.	No one has ever received a Certificate to practise as an Apothecary under the age of 21.	This Recommendation is always strictly adhered to.	This is the <i>invariable</i> rule adopted by the Court of Examiners of this Society.

I (B).—ANSWERS FROM

UNIVERSITY OF OXFORD -	Believed to be conformable	Conformable -	Conformable -	Conformable - - -
UNIVERSITY OF CAMBRIDGE	No candidate is admitted to the final Examination at Cambridge whose name has not been entered in the Medical Student's Register four <i>complete</i> years <i>at the least</i> . The usual time is much longer.	The age is not duly certified. This is unnecessary. No man ever gets a Medical Degree at Cambridge until he is some years older than 21.	Conformable -	Conformable - - -
UNIVERSITY OF DURHAM -	Always acted upon - -	Complied with -	Complied with -	Complied with - - -
UNIVERSITY OF LONDON -	The professional studies required as a condition of graduation cover a period of <i>four</i> years at the least.	A Candidate cannot obtain a Degree in Medicine until he has completed his twenty - first year.	The University rules as to age are consistent with this Regulation.	See answer to Recommendation as to "obtaining a registrable Qualification."

with the Recommendations of the General Medical Council on Education and Examination—*continued.*

ON EDUCATION AND EXAMINATION—*continued.*

That it is undesirable that any Teaching or Licensing Body should insist on the Student taking more than one Course of Lectures on any one subject.	That the following are the subjects, without a knowledge of which no Candidate should be allowed to obtain a Qualification entitling him to be Registered:—(1) Chemistry, including a knowledge of the principles of Chemistry, and of those details of the science which bear on the study of Medicine, and Chemical Physics, meaning thereby Heat, Light, and Electricity; (2) Anatomy; (3) Physiology; (4) Materia Medica and Pharmacy; (5) Pathology, including Morbid Anatomy; (6) Medicine, including Medical Anatomy, Clinical Medicine, and Therapeutics; (7) Surgery, including Surgical Anatomy and Clinical Surgery; (8) Midwifery; (9) Forensic Medicine.	That the Council will view with approbation any encouragement held out by the Licensing Bodies to Students to prosecute the Study of the Natural Sciences, before they engage in studies of a strictly professional character.	That a Certificate be required, by each Licensing Body, from every Candidate for its Degree, Diploma, or License to practise Medicine or Surgery, that he has studied Vaccination under a competent and recognised Teacher; that he has himself performed the operation successfully under the Teacher's inspection; that he is familiar with the different stages of the Vaccine Vesicle, and with the methods of preserving Lymph, and that he is thoroughly informed in every necessary part of the subject.
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MEDICAL CORPORATIONS—*continued.*

This is under consideration with a view to its adoption.	Conformable - - - -	No Comment - - - -	Conformable.
This recommendation has never been brought under the consideration of the Council of the College.	The Council of the College has expressed its concurrence in this recommendation, but, at present, no Examination has been held in the subjects numbered (1), (4), (5), (8), (9). A Committee is about to be appointed to provide for examinations in these subjects. Medical Anatomy and Clinical Medicine are not as yet included in the College Examinations.	This recommendation has never been formally brought under the consideration of the Council of the College, but is in conformity with what has already been approved in the Regulations for a conjoint scheme.	Conformable.
The Court of Examiners adopt this view, except in the case of Anatomy.	All these subjects are included in the Examinations of this Society, except Surgery.	The Court of Examiners of this Society encourage this view, but they have no power to enforce it.	This Regulation is always enforced.

ENGLISH UNIVERSITIES—*continued.*

Conformable - - - -	The License in Oxford is a License to practise Medicine, and not a License to practise Surgery; although in the year 1860 the University included the principles of Surgery, Midwifery, and Hygiene in the Examinations of Candidates for the M.B.	No comment - - - -	With respect to the Examination in Vaccination, the attention of Candidates has been drawn to the Recommendations. Certificates have not been demanded. Those who have the Diploma of the College of Surgeons, as the majority of the Bachelors of Medicine now have, already possess the Certificate.
This is done only in the case of Candidates for the degree of Master in Surgery, who are required to attend a second Course on Anatomy.	Conformable - - - -	Conformable - - - -	Conformable.
Two Courses are necessary on several subjects, for example, Anatomy, Surgery, Medicine, &c.	Complied with - - - -	Complied with - - - -	The perpetual Students of this College are all educated in Vaccination. The Certificate of proficiency has not hitherto been required, but will be in future.
Candidates for first M.B. and Second M.B. Examinations are required to have attended for each two Courses of Lectures; but each of the four courses so required must be on different subjects.	All of these subjects are required at one or other of the Examinations, which must be passed in order to obtain a Degree in Medicine.	The Preliminary Scientific Examination, which all Candidates for a Degree in Medicine are recommended by the Senate to pass before commencing their strictly Professional Studies, fulfils this Recommendation.	No candidate is admitted to the Second M.B. Examination until he has produced a certificate of having acquired proficiency in Vaccination, signed by one of the Vaccinators authorised by the Privy Council to grant such Certificates.

TABLE showing how far the Regulations and Practice of Medical Licensing Bodies are in accordance

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS - - -	<p>That such a Certificate as that specified in the foregoing Recommendation should be received by any Licensing Body only from an Institution where the appointed Teacher of Vaccination is recognised by the Local Government Board.</p>	<p>That it is desirable that the different Licensing Bodies, whether singly or in combination, should frame their Examinations so as to secure that the knowledge of every Practitioner whose name appears on the Register shall have been tested in all the subjects of Professional Education which the Council has determined to be essential, viz. :—(1) Chemistry, including a knowledge of the principles of Chemistry, and of those details of the science which bear on the study of Medicine; and Chemical Physics, meaning thereby Heat, Light, and Electricity; (2) Anatomy; (3) Physiology; (4) Materia Medica and Pharmacy; (5) Pathology, including Morbid Anatomy; (6) Medicine, including Medical Anatomy, Clinical Medicine, and Therapeutics; (7) Surgery, including Surgical Anatomy and Clinical Surgery; (8) Midwifery; (9) Forensic Medicine.</p>
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I (A).—ANSWERS FROM ENGLISH

ROYAL COLLEGE OF PHYSICIANS OF LONDON.	Conformable - - - - -	Conformable in all but the part underlined, which is to be considered by the College.
ROYAL COLLEGE OF SURGEONS OF ENGLAND.	Conformable - - - - -	Answers the same as to Recommendation on "obtaining a registrable Qualification." (Fourth preceding Answer.)
APOTHECARIES' SOCIETY OF LONDON -	This Regulation is always enforced -	As before stated, the Examiners of this Society have acted in strict conformity with this Regulation, except as regards Surgery; and they promoted, as far as they could, the formation of a Conjoint Board.

I (B).—ANSWERS FROM

UNIVERSITY OF OXFORD - - -	See foregoing answer - - - - -	See fourth preceding Answer to the Recommendation on "obtaining a registrable Qualification."
UNIVERSITY OF CAMBRIDGE - - -	Conformable - - - - -	Conformable - - - - -
UNIVERSITY OF DURHAM - - -	Complied with - - - - -	Complied with - - - - -
UNIVERSITY OF LONDON - - -	See answer to foregoing Recommendation.	Previous answers show that these conditions are satisfied in the case of Candidates obtaining Diplomas from the University of London.

with the Recommendations of the General Medical Council on Education and Examination—*continued.*

ON EDUCATION AND EXAMINATION—*continued.*

<p>(a) That there be in future three Professional Examinations.</p> <p>(b) That the Professional Examinations be arranged in two divisions; the first division to embrace the more elementary subjects. The first division may be completed at or before the close of the second year of professional study, but the second division not till the expiration of two years after the passing of the first division, nor before the completion of the fourth year of study. That the Examinations, and the subjects included in each, be such, and in such order, as may ensure, so far as possible, a due continuity and sequence of study.</p>	<p>That the first division of the Examinations shall include the following subjects:—(1) Chemistry and Chemical Physics; (2) Anatomy; (3) Physiology; (4) Materia Medica and Pharmacy.</p> <p>That the second division of the Examinations shall include the following subjects:—(1) Pathology, including Morbid Anatomy; (2) Medicine, including Medical Anatomy, Clinical Medicine, and Therapeutics; (3) Surgery, including Surgical Anatomy and Clinical Surgery; (4) Midwifery; (5) Forensic Medicine.</p>	<p>That it is desirable that an Examination in the earlier subjects of professional study should take place before the end of the first year of professional study.</p>
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MEDICAL CORPORATIONS—*continued.*

<p>This is one of the more recent Recommendations, and is under the consideration of the College.</p> <p>Not conformable, there being only two Professional Examinations for the Diploma of Member, the one held on the completion of eighteen months, and the other at the end of four years of professional study, but the Regulations proposed by the Committee of Reference, under the provisions of the Conjoint Scheme, which have not yet been considered by the Council, are entirely in accordance with the Recommendation.</p> <p>At present there are always two professional Examinations, Surgery, as above stated, not being included.</p>	<p>These are also recent regulations, and will</p> <p>Not conformable. The first or Primary Examination includes Anatomy and Physiology, and the final or Pass Examination, Surgical Anatomy, Surgery, and Medicine.</p> <p>This Recommendation is strictly followed, except as regards Surgery.</p>	<p>most probably be adopted by the College.</p> <p>Not conformable, but is included in the Regulations proposed by the Committee of Reference under the provisions of the Conjoint Scheme.</p> <p>The Court agree that such an Examination is desirable.</p>
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ENGLISH UNIVERSITIES—*continued.*

<p>The Division of the M.B. Examinations into three, instead of two, is under contemplation at the present time.</p> <p>Conformable as to (a) - - - -</p> <p>Conformable to (b) so far as that is in conformity with (a).</p> <p>Complied with - - - -</p> <p>In order to graduate in Medicine at this University, a Candidate must pass, besides the Matriculation Examination—(1) Preliminary Scientific Examination; (2) First Bachelor of Medicine Examination; (3) Second Bachelor of Medicine Examination.</p>	<p>See foregoing Answer - - - -</p> <p>This first Division in Cambridge includes Botany and other Branches of Physics besides Clinical Physics. It also includes Comparative Anatomy. For this first division there are two separate Examinations.</p> <p>The Second Division includes the subjects of the Third Examination for degree of M.B.</p> <p>For the degree of M.C. there is a further, a <i>Fourth</i> Examination.</p> <p>For degree of either M.B. or M.D. there are also required a Thesis and the keeping of an Act.</p> <p>Complied with, excepting that Botany is additional in the First Division, and Materia Medica is in the Second.</p> <p>The first M.B. Examination and the Second M.B. Examination cover the above subjects respectively.</p>	<p>See foregoing Answer.</p> <p>Candidates are not encouraged to enter the Examinations until they are prepared for them.</p> <p>Cannot be complied with, as two Courses of Lectures are required on Anatomy.</p> <p>The Preliminary Scientific Examination is intended to fulfil this requirement.</p>
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TABLE showing how far the Regulations and Practice of Medical Licensing Bodies are in accordance

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS	<p>That the Professional Examinations be conducted both in writing and orally; and that they be practical in all branches in which they admit of being so.</p>	<p>That not less than two Examiners shall take part in every Oral and Clinical Examination.</p>	<p>That the questions to be answered in writing should be submitted to the whole body of Examiners for consideration, and revision if desirable, before being proposed to the Candidates.</p>
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I (A).—ANSWERS FROM ENGLISH

ROYAL COLLEGE OF PHYSICIANS OF LONDON.	Conformable - - -	Conformable - - -	Conformable - - -
ROYAL COLLEGE OF SURGEONS OF ENGLAND,	Conformable - - -	Conformable - - -	Not conformable. Questions are set by a Committee of not less than four of the Examiners taken in rotation.
APOTHECARIES' SOCIETY OF LONDON.	This Recommendation has always been strictly adhered to; and, indeed, the principle was adopted by this Court <i>before</i> the Act of 1858.	This rule is always adopted -	This rule is always adopted -

I (B).—ANSWERS FROM

UNIVERSITY OF OXFORD	Conformable - - -	Conformable - - -	The Examiners are held to be jointly responsible for all the papers, and jointly as well as severally for the judgment passed upon the answers.
UNIVERSITY OF CAMBRIDGE	Conformable - - -	Conformable - - -	Conformable - - -
UNIVERSITY OF DURHAM	Complied with - - -	Complied with - - -	Complied with - - -
UNIVERSITY OF LONDON	The University Examinations are in part written, in part oral and practical.	See the second answer after this.	The Examiners in each Branch are responsible for their own Papers, subject to the approval of the Senate.

with the Recommendations of the General Medical Council on Education and Examination—*continued.*

ON EDUCATION AND EXAMINATION—*continued.*

That the written answers should be submitted to more than one of the Examiners.	That excellence in one or more subjects should not be allowed to compensate for failure in others.	That the Professional Examinations be held by the several Licensing Bodies, except in special cases, at stated periods, to be publicly notified.	That Returns from the Licensing Bodies in Schedule (A.) be made annually, on the 1st of January, and in a prescribed form, to the General Medical Council, stating the number of the Candidates who have passed their First as well as their Second and Third Examinations, and the number of those who have been rejected at the First and Second and Third Examinations respectively.
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MEDICAL CORPORATIONS—*continued.*

Conformable - - -	Conformable - - -	Conformable - - -	Conformable.
Conformable - . -	Conformable, excepting so far as the practice is modified.	Conformable - - -	Conformable.
This rule is always adopted -	This rule is always adopted -	This rule has always been adopted since the year 1815.	This is always done.

ENGLISH UNIVERSITIES—*continued.*

See foregoing Answer - -	The usage of the University is conformable to this Recommendation.	Conformable - - -	Conformable.
Conformable - - -	Conformable - - -	Conformable - - -	Conformable.
In most subjects the above is complied with.	Complied with - - -	Complied with - - -	The form supplied by the General Medical Council is regularly filled up and returned.
The University Examinations are always conducted by <i>two</i> Examiners in each Branch.	Candidates at the University Examinations have to show a competent knowledge in <i>all</i> the subjects of Examination.	The University Examinations are held at stated times, duly notified in the Calendar.	Lists of Candidates who have obtained Registrable Qualifications are forwarded as such Qualifications are obtained.

TABLE showing how far the Regulations and Practice of Medical Licensing Bodies are in accordance

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS	<p>That it is not desirable that any University of the United Kingdom should confer any degree in Medicine or Surgery, whether that of Bachelor, Doctor, or Master, upon Candidates who have not graduated in Arts, or passed all the Examinations required for the Bachelorship in Arts, or passed, after due course of Education, Examinations, such as are, <i>bonâ fide</i>, academically equivalent to those required for a Degree in Arts.</p>	<p>That, in the opinion of the Council, it would be desirable, as a general rule, that none of the Higher Degrees or Qualifications in Medicine or Surgery, should be conferred on persons who have not shown evidence of higher professional attainments.</p>	<p>That it is desirable that in the Examinations on several of the subjects of the Curriculum, such, for example, as Chemistry, including Chemical Physics, Physiology, and Materia Medica, the Licensing Bodies should limit and define by Schedule the extent of Examination.</p>
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I (A).—ANSWERS FROM ENGLISH

ROYAL COLLEGE OF PHYSICIANS OF LONDON.	No Comment - - -	Conformable - - -	A recent Recommendation of Council, to be considered this year (1880).
ROYAL COLLEGE OF SURGEONS OF ENGLAND.	Does not concern the College	Conformable - - -	Not conformable, but is proposed by the Committee of Reference under the Conjoint Scheme.
APOTHECARIES' SOCIETY OF LONDON.	This question applies only to the Universities.	The Society of Apothecaries does not confer the higher Degrees or Qualifications.	This rule is adopted as far as possible.

I (B).—ANSWERS FROM

UNIVERSITY OF OXFORD -	Conformable - - -	This is the aim of the Examinations.	This has not been done -
UNIVERSITY OF CAMBRIDGE	Conformable - - -	Conformable - - -	Conformable - - -
UNIVERSITY OF DURHAM -	The above is not literally carried out, but a higher Examination is required in Art.	Complied with - - -	Not complied with - -
UNIVERSITY OF LONDON -	Candidates who graduate in the Faculty of Medicine are not required previously to graduate in the Faculty of Arts.	No Comment - - -	The University Regulations strictly define by syllabus the extent of Examination in each subject.

with the Recommendations of the General Medical Council on Education and Examination—*continued.*

ON EDUCATION AND EXAMINATION—*continued.*

That it be recommended that in no case should the Examination of a Candidate by any of the Licensing Bodies, in any subject, be conducted wholly by the Lecturer or Teacher in that subject in the School in which the Candidate has been educated.	That it is desirable that observation with the Microscope should form part of the Examinations of Candidates for a license.	That it be recommended that Candidates for the Final Professional Examination be required to give evidence that they have had opportunities of practical study, with care of patients, as Pupil, Assistant, Clinical Clerk, or Dresser, in Hospital, Dispensary, or elsewhere.	That it is desirable that in Examinations in Anatomy, Candidates should understand that they may be called upon to perform actual Dissections, and that Candidates in Examinations in Surgery should understand that they may be called upon to perform one or more Operations on the Dead Subject.
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MEDICAL CORPORATIONS—*continued.*

Conformable - - -	Conformable - - -	Conformable - - -	Conformable. Operations on the Dead Subject always form part of the Examinations in Surgery.
Conformable, teachers not being allowed to examine their pupils wholly or in part.	Conformable - - -	Conformable ; a Dressership being required.	Not conformable.
This is never done at the Examinations of this Court.	It is compulsory with <i>all</i> the Candidates for this License to undergo Examinations in the Microscope.	This Recommendation is always followed.	This Court, having no power to examine in Surgery, and having no dissecting rooms, conduct their Anatomical Examination by means of Examination upon the living subject, by dried and preserved specimens, and by plates, and by written and oral questions and answers.

ENGLISH UNIVERSITIES—*continued.*

This is never allowed - - <i>N.B.</i> —It has to be observed that whenever the Conjoint Scheme has established the minimum standard, the M.B. degree will become a degree in Honours, and the Statute of the University relating to the Medical Examinations will have to be remodelled accordingly. The reconstruction of this Statute would have been undertaken long ago but for the delay in the establishment of a Conjoint Board. It has been from the feeling that it was undesirable to add to the existing number of Qualifications, that since the passing of the <i>Medical Act</i> (1858) the University has refrained from establishing a separate qualifying Examination in Surgery.	This is always the case -	This is not enforced by Statute ; though probably it rarely occurs that the Candidates have not been Hospital Dressers and Clerks.	This principle is acted upon as regards the Examinations in Anatomy.
Conformable - - -	Conformable - - -	Conformable - - -	All Candidates are actually required to perform Dissections as an essential part of the Examination in Anatomy.
Complied with - - -	Complied with - - -	Complied with - - -	Complied with.
This would not be at all likely to occur at the University.	Observations with the microscope form part of the Examination at the University.	Candidates before entering for the Second M.B. Examination must have attended to Practical Medicine, with <i>special charge of patients</i> , for six months.	This condition is fulfilled at the University Examinations.

TABLE showing how far the Regulations and Practice of Medical Licensing Bodies are in accordance

II.—SCOTTISH MEDICAL

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS	<p>That it be recommended to the Licensing Boards not to accept the Certificate of proficiency in General (Preliminary) Education from any of the bodies, the names of which are contained in the list annually circulated, unless such Certificate testify that the Student to whom it has been granted has been examined in the following subjects:—(1) English Language, including Grammar and Composition; (2) Arithmetic, including Vulgar and Decimal Fractions; (3) Algebra, including Simple Equations; (4) Geometry, First, two books of Euclid, or the subjects thereof; (5) Latin, including Translation and Grammar; (6) Also one of these optional subjects—Greek; French; German; Elementary Mechanics of Solids and Fluids—meaning thereby Mechanics, Hydrostatics, Pneumatics, and Hydraulics.</p>	<p>That it is desirable that the Examination in General Education be left to the Universities, and such other Bodies engaged in General Education and Examination as may from time to time be approved by this Council; and that it be delegated to the Executive Committee to communicate with the Licensing Bodies on the subject.</p>
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II (A).—ANSWERS FROM SCOTTISH

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH.	<p>The Regulations and Practice of the Royal College of Physicians of Edinburgh are in strict conformity with this Regulation.</p> <p>neither necessary nor expedient “to part with a privilege which they consider it important that they should continue to possess, and to abandon a duty which they have always endeavoured to fulfil conscientiously and efficiently.”</p>	<p>The College is of opinion, for the reasons stated in their answer of date 4th February 1878, to a letter sent by the Executive Committee of the General Medical Council, that it is</p>
ROYAL COLLEGE OF SURGEONS OF EDINBURGH.	<p>The Certificate of Registration as a Medical Student alone is accepted as evidence of having passed the full Preliminary Examination. The College has adopted and incorporated this in its Regulations.</p>	<p>The Preliminary Examination of this College is conducted jointly with the Royal College of Physicians of Edinburgh.</p>
FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW.	<p>To this the Faculty conform in their Regulations and Practice.</p> <p>Committee of the Medical Council have not yet thought it proper to give up the Preliminary Examination conducted by their own Board of Examiners in Arts, which is quite distinct from the Board of Professional Examiners.</p>	<p>The Faculty, for the reasons stated in their answer to the communication thereanent from the Executive</p>

II (B).—ANSWERS FROM

UNIVERSITY OF EDINBURGH - - -	<p>The University requires all the five compulsory subjects specified by the General Medical Council, but exacts a higher knowledge of Geometry. Mechanics also is compulsory, and, in addition, any two of the following subjects—Greek, French, German, Higher Mathematics, Natural Philosophy, Logic, and Moral Philosophy. Greek, and either Logic or Moral Philosophy, are, however, imperative for the degree of M.D.</p>	<p>No Examinations are accepted, except such as are recognised by the General Medical Council, and which are of the extent required by this University.</p>
UNIVERSITY OF ABERDEEN - - -	<p>Conformable - - - - -</p>	<p>This University approves of the Recommendation.</p>
UNIVERSITY OF GLASGOW - - -	<p>Conformable. The Examination in Geometry includes the first <i>three</i> books of Euclid. The Examination in Latin includes translation from two prescribed Latin authors, translation from a work not specified, translation of English into Latin, and Grammar.</p>	<p>The Examination in General Education is conducted by a special Committee termed the “Examining Board for General Education.” This Board consists of certain Professors in the Faculties of Arts and Medicine, along with the Examiners in Arts. It has a special Secretary and keeps a special minute book. From time to time it reports to the Senatus Academicus the results of the Examinations.</p>
UNIVERSITY OF ST. ANDREWS - - -	<p>Conformable - - - - -</p>	<p>This University does not approve of the above Recommendation, as it believes the “Examination in General Education” can be efficiently conducted by bodies which do not teach.</p>

with the Recommendations of the General Medical Council on Education and Examination—*continued*.

LICENSING BODIES.

ON EDUCATION AND EXAMINATION.

That it be recommended to the various Licensing Bodies to instruct their Examiners in Professional subjects to report to them any case in which decided ignorance in the subjects of General Education has been displayed by the Candidates, with the name of the Board or Boards before which the Preliminary Examinations have been passed : and that the Licensing Bodies be requested to transmit such Reports to the Registrar of the General Medical Council.	No Medical Student shall be registered until he has passed a Preliminary Examination, as required by the General Medical Council, and has produced evidence that he has commenced Medical Study.	The commencement of the course of professional study required by any of the Qualifying Bodies, shall not be reckoned as dating earlier than fifteen days before the date of Registration.	The several Branch Councils shall have power to admit special exceptions to the Regulations as to Registration, for reasons which shall appear to them satisfactory.
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MEDICAL CORPORATIONS.

The College highly approve of this Recommendation, and have instructed their Examiners to carry it out. No cases have however as yet occurred in which such decided ignorance has been displayed by the Candidates as to make it necessary in the opinion of the Council of the College to report them to the Registrar of the General Medical Council.	The College does not itself register Medical Students, but requires Candidates to produce their Certificates of Registration.	This Recommendation is complied with.	The College never admits exceptions to the Recommendations of the Medical Council under this head. All doubtful cases are referred to the Scottish Branch Council.
The College has done this for some years.	This Recommendation is believed to be duly attended to by the Medical Registrars.	This is attended to - -	Such exceptions are very rarely admitted with reference to Licentiates.
This has been conformed to, inasmuch as such an instruction was given at the time the Recommendation was first made.	The Faculty do not register Students.	Regulations and Practice conformable thereto.	Exceptional cases are not dealt with by the Faculty, but referred to the Branch Council.

SCOTTISH UNIVERSITIES.

No such case has yet had to be reported.	Conformable - - -	Medical Education is received as qualifying only after the date of Registration.	This is a matter for the Branch Medical Councils.
The Medical Examiners of this University have not had occasion to make any such report.	Conformable - - -	Conformable - - -	It is for the Branch Councils to answer this question.
The Examiners in Professional Subjects make a note of any cases of ignorance in the subjects of General Education; but no special inquiry has been made as to the Board or Boards before which the Preliminary Examinations of the Candidate have been passed; neither has any report on this matter been hitherto transmitted to the Registrar of the General Medical Council.	Conformable - - - This practice is enforced on Students.	Conformable - - -	In all cases of difficulty reference is made to the Registrar of the Branch Council for Scotland.
No such case known - -	Conformable - - -	Conformable - - -	This University approves of this discretionary power.

TABLE showing how far the Regulations and Practice of Medical Licensing Bodies are in accordance

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS-	The several Qualifying Bodies are recommended not to admit to the Final Examination for a Qualification under the Medical Acts, any Candidate (not exempted from Registration) whose name has not been entered in the Medical Student's Register at least forty-five months previously. In the case of Candidates from other than Schools of the United Kingdom, the Branch Councils shall have power to admit exceptions to this Recommendation.	That the age of twenty-one be the earliest age at which a Candidate shall obtain a license to practise, and that the age shall, in all instances, be duly certified.	That no license be obtained at an earlier period than after the expiration of forty-five months, subsequent to the Registration of the Candidate as a Medical Student.	That the course of professional study required for a license shall occupy at least four years, of which at least three Winter and two Summer Sessions shall be passed at any School recognised by any of the Licensing Bodies mentioned in Schedule (A) of the Medical Act.
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II (A).—ANSWERS FROM SCOTTISH

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH.	Recommendation complied with.	Recommendation complied with.	Recommendation complied with.	Recommendation complied with.
ROYAL COLLEGE OF SURGEONS OF EDINBURGH.	This Recommendation is acted upon by the College with extreme care and severity.	No candidate receives the Diploma of this College until he has attained 21 years of age.	This Recommendation is acted upon.	The Regulations of the College are conformable to this Recommendation.
FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW.	Regulations and Practice conformable thereto.	Regulations and Practice conformable thereto.	Regulations and Practice conformable thereto, except in the case of Students who began study before 1st October 1866.	Regulations and Practice conformable thereto.

II (B).—ANSWERS FROM

UNIVERSITY OF EDINBURGH	No Candidate is admitted to Final Examination who has not been registered for the period here mentioned.	No Candidate is admitted to any Medical or Surgical Degree until 21 years of age, which is proved by official certificate of birth.	No Degree is conferred on any Candidate who has not been registered as here mentioned.	At least four years' attendance at a school of medicine is required.
UNIVERSITY OF ABERDEEN	Four years of attendance at a Medical School, including four Winter Sessions, are required by this University. Those who take the Final Examination at the April term do so after at least 42 months; those who take it at the August term do so after at least 45 months of Medical Study.	Conformable -	See the second answer before this.	The Classes and Hospital Practice required by this University require not less than four Winter and two Summer Sessions, but generally in addition a third Summer is attended.
UNIVERSITY OF GLASGOW -	Conformable - - -	Conformable -	Conformable. If a student begin his studies at the commencement of the first Winter Session subsequent to Registration, he cannot graduate until 45 months thereafter; if he begins his studies at the commencement of the first Summer Session subsequent to Registration, he cannot graduate until 51 months thereafter.	Conformable - -
UNIVERSITY OF ST. ANDREWS.	Conformable - - -	Conformable -	Conformable -	Conformable - -

with the Recommendations of the General Medical Council on Education and Examination—*continued.*ON EDUCATION AND EXAMINATION—*continued.*

That it is undesirable that any Teaching or Licensing Body should insist on the Student taking more than one Course of Lectures on any one subject.	That the following are the subjects, without a knowledge of which no Candidate should be allowed to obtain a Qualification entitling him to be Registered:—(1) Chemistry, including a knowledge of the principles of Chemistry, and of those details of the science which bear on the study of Medicine, and Chemical Physics, meaning thereby Heat, Light, and Electricity; (2) Anatomy; (3) Physiology; (4) Materia Medica and Pharmacy; (5) Pathology, including Morbid Anatomy; (6) Medicine, including Medical Anatomy, Clinical Medicine, and Therapeutics; (7) Surgery, including Surgical Anatomy and Clinical Surgery; (8) Midwifery; (9) Forensic Medicine.	That the Council will view with approbation any encouragement held out by the Licensing Bodies to Students to prosecute the Study of the Natural Sciences, before they engage in studies of a strictly professional character.	That a Certificate be required, by each Licensing Body, from every Candidate for its Degree, Diploma, or License to practise Medicine or Surgery, that he has studied Vaccination under a competent and recognised Teacher; that he has himself performed the operation successfully under the Teacher's inspection; that he is familiar with the different stages of the Vaccine Vesicle, and with the methods of preserving Lymph, and that he is thoroughly informed in every necessary part of the subject.
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MEDICAL CORPORATIONS—*continued.*

This Recommendation is complied with by the College in regard to its single License; but in the case of Candidates for the double Qualification granted in conjunction with the Royal College of Surgeons of Edinburgh, and in deference to the wishes of that Body, besides one course of Medicine and one of Clinical Medicine, a third course is required which may be either a course of Medicine or one of Clinical Medicine, at the option of the Candidate; and in like manner in Surgery a third course is required which may be either one of Systematic or of Clinical Surgery. In the case also of Candidates for the double Qualification granted in conjunction with the Faculty of Physicians and Surgeons of Glasgow, an additional course of Surgery or of Clinical Surgery, at the option of the Candidate, is required.	Complied with - - -	No steps have been taken by the College in connection with this Recommendation.	Complied with.
In Anatomy and Surgery the Rules allow the Student to take Dissection and Clinical Surgery in place of second course.	No Candidate obtains the License without a knowledge of all the subjects here specified.	The College incorporates in its Rules a strong recommendation to this effect.	Such a Certificate is invariably required.
The Faculty require double courses of Anatomy and of Surgery (or Clinical Surgery). In the case of other subjects the Regulations conform to this Recommendation.	Regulations and Practice conformable thereto.	Regulations and Practice conformable thereto.	Every Candidate must produce evidence of proficiency in Vaccination, the evidence to consist of the Certificate of a Public Vaccinator, or of a Medical Practitioner.

SCOTTISH UNIVERSITIES—*continued.*

This University does not require any Student to take more than one course of Lectures on any one subject.	Conformable, but the University exacts in addition a knowledge of Botany and Natural History.	Conformable - - -	Such Certificate is required to be produced.
The Regulations of the University do not require attendance on more than one course of Lectures on any subject.	Conformable - - -	All Candidates for the Degree are required to attend the courses of, and to pass an Examination in, Botany and in Zoology, as well as in Chemistry.	A Certificate for Vaccination is required.
Conformable. The University Calendar contains a list of those courses of Lectures which must be attended for graduation purposes, and Students are at liberty to take such second courses as they may deem expedient. There is no compulsion as regards second courses of Lectures.	Conformable. In addition, the University of Glasgow examines all Candidates on Botany and Zoology.	During the first year of Medical study, Students of the University of Glasgow are almost wholly engaged in the study of the Natural Sciences. In some cases Students may have studied Chemistry, Botany, or Zoology, prior to the commencement of the four years of Medical Study; but the great majority devote the first year of the Curriculum to the study of the Natural Sciences.	Conformable. In all cases such a special Certificate is required.
This University approves of the above Recommendation, the duplication of classes in many cases pressing heavily on the student. This University requires only one course in each subject.	This University, in addition to the above, examines in Botany and Natural History.	Conformable - - -	Conformable.

TABLE showing how far the Regulations and Practice of Medical Licensing Bodies are in accordance

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS - - -	That such a Certificate as that specified in the foregoing Recommendation should be received by any Licensing Body only from an Institution where the appointed Teacher of Vaccination is recognised by the Local Government Board.	That it is desirable that the different Licensing Bodies, whether singly or in combination, should frame their Examinations so as to secure that the knowledge of every Practitioner whose name appears on the Register shall have been tested in all the subjects of Professional Education which the Council has determined to be essential, viz. :—(1) Chemistry, including a knowledge of the principles of Chemistry, and of those details of the science which bear on the study of Medicine; and Chemical Physics, meaning thereby Heat, Light, and Electricity; (2) Anatomy; (3) Physiology; (4) Materia Medica and Pharmacy; (5) Pathology, including Morbid Anatomy; (6) Medicine, including Medical Anatomy, Clinical Medicine, and Therapeutics; (7) Surgery, including Surgical Anatomy and Clinical Surgery; (8) Midwifery; (9) Forensic Medicine.
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II (A).—ANSWERS FROM SCOTTISH

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH.	Such a Certificate from any competent teacher is recognised by the College, but Candidates are warned in the Regulations that only Certificates from Teachers of Vaccination specially recognised by the Local Government Board are accepted by that Board from Candidates for Poor Law appointment in England.	Complied with - - - - -
ROYAL COLLEGE OF SURGEONS OF EDINBURGH.	The College recommends this, but has not as yet insisted on it.	This is answered by the answer to Recommendation on "obtaining a registrable Qualification." (Fourth preceding answer.)
FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW.	By the Regulations this is not imperative, though, as a matter of fact, the Certificates of Vaccination presented are for the most part those obtained at Vaccine stations recognised by the Local Government Board.	Regulations and Practice conformable thereto.

II (B).—ANSWERS FROM

UNIVERSITY OF EDINBURGH - - -	Such only is received - - - -	Conformable, and in addition Botany and Natural History.
UNIVERSITY OF ABERDEEN - - -	The instruction in Vaccination in this School is given at the Lying-in and Vaccine Institution. The Local Government Board having declined as yet to recognise a Vaccinator in Aberdeen, it is impossible for this University to comply with this part of the Recommendation, even were it expedient to confine the instruction to one teacher.	The Examinations of this University, whether for the Degree in Medicine or the Degree in Surgery, have always comprised the whole of the subjects of Professional Education.
UNIVERSITY OF GLASGOW - - -	Conformable. This practice is followed	Conformable. In addition the University of Glasgow examines all Candidates on Botany and Zoology.
UNIVERSITY OF ST. ANDREWS - -	Conformable - - - - -	This University, in addition to the above, examines in Botany and Natural History.

with the Recommendations of the General Medical Council on Education and Examination—*continued.*

ON EDUCATION AND EXAMINATION—*continued.*

<p>(a) That there be in future three Professional Examinations.</p> <p>(b) That the Professional Examinations be arranged in two divisions; the first division to embrace the more elementary subjects. The first division may be completed at or before the close of the second year of professional study, but the second division not till the expiration of two years after the passing of the first division, nor before the completion of the fourth year of study. That the Examinations, and the subjects included in each, be such, and in such order, as may ensure, so far as possible, a due continuity and sequence of study.</p>	<p>That the first division of the Examinations shall include the following subjects:—(1) Chemistry and Chemical Physics; (2) Anatomy; (3) Physiology; (4) Materia Medica and Pharmacy.</p> <p>That the second division of the Examinations shall include the following subjects:—(1) Pathology, including Morbid Anatomy; (2) Medicine, including Medical Anatomy, Clinical Medicine, and Therapeutics; (3) Surgery, including Surgical Anatomy and Clinical Surgery; (4) Midwifery; (5) Forensic Medicine.</p>	<p>That it is desirable that an Examination in the earlier subjects of professional study should take place before the end of the first year of professional study.</p>
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MEDICAL CORPORATIONS—*continued.*

<p>The College have at present only two Professional Examinations, divided as follows:—(1) Anatomy, Physiology, and Chemistry. (The Examination in Chemistry is restricted to the subjects detailed in No. 6 of the enclosed Regulations.) (2) Materia Medica and Pharmacy, Pathology and Pathological Anatomy, Practice of Medicine, Surgery, Midwifery, Medical Jurisprudence, Clinical Medicine. The Regulations state that “no Candidate will be admitted to the first Examination until the end of his second Winter Session, or to the second until he has completed four years of Professional Study.”</p>		<p>The College has not established any Examination to be undergone until the end of the second Winter Session.</p>
<p>The College has two Professional Examinations, the first of which takes place not sooner than the end of the second Winter Session, and the second does not take place before the termination of the Winter Session of the last year of study.</p>	<p>The First Professional Examination embraces Anatomy, Physiology, and Chemistry; and the Second embraces Surgery and Surgical Anatomy; also Medicine, Midwifery, Materia Medica, and Medical Jurisprudence.</p>	<p>See answer on Professional Examinations.</p>
<p>The Faculty have, up to this time, two Professional Examinations. To the first the Candidate is admissible at the expiry of his second year of study; and to the last he is admissible at the end of his full Course.</p>	<p>The First Examination of the Faculty embraces Anatomy, Physiology, and Chemistry. The Second embraces Surgery, Medicine, Pathology, Materia Medica, Midwifery, and Forensic Medicine.</p>	<p>To this the Regulations and Practice of the Faculty are not conformable.</p>

SCOTTISH UNIVERSITIES—*continued.*

<p>(a) Conformable - - - - -</p> <p>(b) The First Examination is before the second Winter; the Second Examination at the end of the third Winter; the Third Examination during the fourth Summer.</p>	<p>The First Examination is on Botany, Zoology, and Chemistry; the Second on Anatomy, Physiology, Materia Medica, and Pathology, the Third on Medicine, Surgery, Midwifery, Forensic Medicine and Public Health, Clinical Medicine, and Clinical Surgery.</p>	<p>The first Examination takes place before the second Winter.</p>
<p>(a) Conformable. There have been three Examinations for many years.</p> <p>(b) The first Examination takes place at the end of the second year; the Second Examination at the end of the third year; the third Examination at the end of the fourth year of professional study.</p>	<p>The First Examination comprises Botany, Chemistry, Materia Medica, and Elementary Anatomy. The Second Examination comprises Advanced Anatomy, Physiology, Zoology, with Comparative Anatomy, and Surgery. The Third Examination comprises Practice of Medicine, Clinical Medicine, Clinical Surgery, Midwifery, General Pathology, and Medical Jurisprudence.</p>	<p>A proposal by this University is now before the Privy Council for an alteration of the ordinance, by which the Examination in Botany, Zoology, and Chemistry would take place before the second year of professional study.</p>
<p>In the University of Glasgow there are now four Professional Examinations. The first takes place at the end of one Winter and two Summer Sessions, or of two Winter and one Summer Session, and is on Chemistry, Botany, and Zoology; the second, at the end of two Winter and three Summer Sessions, is on Anatomy and Physiology (including Histology); the third, at the first term of Examination happening after having passed the second, is on Anatomy, Materia Medica, including Pharmacy and Pathology; and the fourth, at the end of the four years of study, is on Medicine, Surgery (including Operative Surgery), Therapeutics, Midwifery, Clinical Medicine, Clinical Surgery, and Forensic Medicine.</p>	<p>Conformable - - - - -</p>	<p>The first Professional Examination, suppose the Candidate begins his studies by a Summer Session, may be passed 15 months after the termination of the first Summer Session. If he begin by a Winter Session, he cannot appear for the first Professional Examination till the end of the second Winter Session, that is, 18 months from the commencement of his studies.</p>
<p>Conformable - - - - -</p>	<p>Conformable - - - - -</p>	<p>Conformable.</p>

TABLE showing how far the Regulations and Practice of Medical Licensing Bodies are in accordance

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS -	That the Professional Examinations be conducted both in writing and orally; and that they be practical in all branches in which they admit of being so.	That not less than two Examiners shall take part in every Oral and Clinical Examination.	That the questions to be answered in writing should be submitted to the whole body of Examiners for consideration, and revision if desirable, before being proposed to the Candidates.
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II (A).—ANSWERS FROM SCOTTISH

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH.	Complied with - - -	Complied with - - -	Complied with - - -
ROYAL COLLEGE OF SURGEONS OF EDINBURGH.	Both Professional Examinations are conducted partly in writing, partly orally, and are practical in all branches in which they admit of being so.	Two Examiners take part in every Oral and Clinical Examination.	This revision is very carefully and methodically done by all the Examiners at stated intervals.
FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW.	Regulations and practice conformable thereto.	Regulations and Practice conformable thereto.	The questions to be answered in writing in any subject of Examination are submitted to the Examiners on that subject, and also to the President. If the Examiners on any subject differ as to the propriety of any question, an appeal may be made to the whole Board of Examiners.

II (B).—ANSWERS FROM

UNIVERSITY OF EDINBURGH -	Conformable - - -	Two Examiners take part in every Oral and Clinical Examination for Degrees.	Questions to be answered in writing are submitted to the whole body of Examiners for consideration and revision before being proposed to the Candidates.
UNIVERSITY OF ABERDEEN -	Conformable, and have long been so.	Conformable. There are always two Examiners in each subject.	The question for the Written Examination in each subject are set conjointly by the Professor in that subject and the outside Examiner.
UNIVERSITY OF GLASGOW -	Conformable. In each subject the Oral Examination is made as practical as possible. The Candidate is examined with the aid of specimens, preparations, microscopes, and other instruments, and surgical appliances. In Anatomy he is examined in Histology. He is required to dissect, and he is examined on fresh dissections; in Physiology he is examined in Histology, Histological Methods, and on the Chemical Analysis of Urine, &c.	Conformable. Not unfrequently members of the Medical Faculty, other than those specially engaged in the Examination, are present at the Oral Examinations, and it is regarded as a privilege of any Member of the Medical Faculty to take part in the Examination. This Committee has a special Secretary, and a special minute book, and it reports the result of Examinations to the Senatus Academicus. All questions to be answered in writing are submitted to this Committee. Further, Examiners report the results of Examinations to this Committee, which has the sole power of passing or of rejecting any Candidate.	This has for many years been the Practice of the University of Glasgow. Recently a special Board or Committee has been formed, called the "Committee for Professional Examinations in Medicine." This Committee consists of all the Members of the Medical Faculty and of all the extra-professional Examiners, at present eight in number.
UNIVERSITY OF ST. ANDREWS -	Conformable - - -	Conformable - - -	Conformable - - -

with the Recommendations of the General Medical Council on Education and Examination—*continued.*

ON EDUCATION AND EXAMINATION—*continued.*

That the written answers should be submitted to more than one of the Examiners.	That excellence in one or more subjects should not be allowed to compensate for failure in others.	That the Professional Examinations be held by the several Licensing Bodies, except in special cases, at stated periods, to be publicly notified.	That returns from the Licensing Bodies in Schedule (A) be made annually, on the 1st of January, and in a prescribed form, to the General Medical Council, stating the number of the Candidates who have passed their First as well as their Second and Third Examinations, and the number of those who have been rejected at the First and Second and Third Examinations respectively.
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MEDICAL CORPORATIONS—*continued.*

Complied with - - -	Complied with - - -	Complied with - - -	Complied with.
The written answers are always submitted to more than one of the Examiners.	Failure in one subject is regarded as failure in all.	The Professional Examinations, except in special cases, are held at stated periods, publicly notified in the Regulations.	These returns are made annually.
Regulations and Practice conformable thereto.	Regulations and Practice conformable thereto.	Regulations and Practice conformable thereto.	Regulations and Practice conformable thereto.

SCOTTISH UNIVERSITIES—*continued.*

The written answers are always submitted to two Examiners.	Excellence in one or more subjects is not allowed to compensate for failure in others.	The Professional Examinations are held at stated periods publicly announced in the University Calendar.	Such returns are made annually.
The written answers are always examined by both of the Examiners on that subject.	No such practice exists here -	Conformable. The Examinations are always held at stated periods, viz.—the end of the Winter Session and the end of the Summer Session.	Such returns are always furnished as recommended.
Conformable. The papers are submitted to at least two Examiners.	Conformable. The principle followed in the University of Glasgow is that the Student shall attain a certain number of marks in each subject to entitle him to pass. Excellence in one or more is not allowed to compensate for failure in others.	Conformable. The periods of Professional Examination are publicly notified in the Calendar of the University. No examinations are held at other times.	Conformable.
Conformable - - -	Conformable - - -	The Medical Examinations in St. Andrews take place in April in each year.	Conformable.

TABLE showing how far the Regulations and Practice of Medical Licensing Bodies are in accordance

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS	<p>That it is not desirable that any University of the United Kingdom should confer any degree in Medicine or Surgery, whether that of Bachelor, Doctor, or Master, upon Candidates who have not graduated in Arts or passed all the Examinations required for the Bachelorship in Arts, or passed, after due course of Education, Examinations, such as are, <i>bonâ fide</i>, academically equivalent to those required for a Degree in Arts.</p>	<p>That, in the opinion of the Council, it would be desirable, as a general rule, that none of the Higher Degrees or Qualifications in Medicine or Surgery should be conferred on persons who have not shown evidence of higher professional attainments.</p>	<p>That it is desirable that in the Examinations on several of the subjects of the Curriculum, such, for example, as Chemistry, including Chemical Physics, Physiology, and Materia Medica, the Licensing Bodies should limit and define by Schedule the extent of Examination.</p>
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II (A).—ANSWERS FROM SCOTTISH

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH.	Does not affect this College -	It has always been the opinion of this College that a better test of the suitability of candidates for its higher qualifications in Medicine is afforded by the production of unexceptional evidence as to professional and social standing, than by the institution of additional examinations. At the same time the whole subject came under the consideration of the College two years and a half ago, and a Committee was appointed to inquire and report whether any and what changes should be introduced into the procedure for election to the Membership and Fellowship. Almost immediately afterwards, however, the Government Medical Act (1858) Amendment Bill was introduced, and as it threatened to effect very materially the position of the College, no further steps have been taken in the matter.	No limitation of the subjects required in the Examinations in Physiology and Materia Medica has been indicated; but in Chemistry the subjects are limited and defined as specified in the Regulations.
ROYAL COLLEGE OF SURGEONS OF EDINBURGH.	Does not affect this College -	The College attends to this Recommendation.	In Chemistry a limitation of the subjects is annually prescribed in the Regulations.
FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW.	No Comment - - -	The Fellowship of the Faculty is conferred by Election, not by Examination. Candidates must satisfy the Faculty in regard to their Professional status, attainments, and moral character.	Regulations and Practice conformable thereto in the case of Chemistry, of which the area of Examination is defined from year to year.

II (B).—ANSWERS FROM

UNIVERSITY OF EDINBURGH -	Conformable to the last alternative clause.	Conformable - - -	Such is the case in Chemistry, Botany, and Natural History.
UNIVERSITY OF ABERDEEN -	The Degree of Bachelor of Arts does not exist in the Scotch Universities. The Degree of Master of Arts alone is given, for which four years' attendance is required in the classes in the Faculty of Arts. The Preliminary Examination in General Education, fixed by the Scottish Universities Commission of 1861, comprises for the Degree of Bachelor of Medicine, and of Master in Surgery, English, Latin, Arithmetic, the Elements of Mathematics, Mechanics, and any two of the following subjects, viz., Greek, French, German, Higher Mathematics, Natural Philosophy, Natural History, Logic, Moral Philosophy; and for the Degree of M.D., in addition to one of these optional subjects, Greek and Logic, or Moral Philosophy.	Conformable. The Examinations in Professional, as well as in Preliminary subjects by this University are on a higher standard than those for qualifications given by the Corporations.	Except in Botany and Chemistry it is not customary to limit and define the extent of the Examination.
UNIVERSITY OF GLASGOW -	Conformable - - -	Conformable - - -	The University does not define or limit the extent of the Examinations in any of the above subjects. In Botany and Zoology, a list of natural orders or of special groups of the animal kingdom with which the Student is required to be specially acquainted, is usually published, but, in addition, a general knowledge of the whole subject is required.
UNIVERSITY OF ST. ANDREWS	Conformable - - -	Conformable - - -	This University does not so limit the range of its Examinations, but is prepared to do so to the same extent as the other Universities.

with the Recommendations of the General Medical Council on Education and Examination—*continued.*

ON EDUCATION AND EXAMINATION—*continued.*

That it be recommended that in no case should the Examination of a Candidate by any of the Licensing Bodies, in any subject be conducted wholly by the Lecturer or Teacher in that subject in the School in which the Candidate has been educated.	That it is desirable that observation with the Microscope should form part of the Examinations of Candidates for a license.	That it be recommended that Candidates for the final Professional Examination be required to give evidence that they have had opportunities of practical study, with care of patients, as Pupil, Assistant, Clinical Clerk, or Dresser, in Hospital, Dispensary, or elsewhere.	That it is desirable that in Examinations in Anatomy, Candidates should understand that they may be called upon to perform actual Dissections, and that Candidates in Examinations in Surgery should understand that they may be called upon to perform one or more Operations on the Dead Subject.
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MEDICAL CORPORATIONS—*continued.*

Complied with - - -	Complied with - - -	Complied with - - -	So far as possible this Recommendation has been complied with, though the scarcity of subjects has prevented it from being carried out so far as would be desirable.
The Examination of a Candidate is never conducted wholly by one Examiner. The Faculty have no Regulation on the subject; but in practice every candidate is examined by several Examiners other than his own teachers; and in every subject he is examined by <i>two</i> Examiners, of whom only one <i>can</i> be his teacher in that subject.	The use of the Microscope forms part of the Examinations. Regulations and Practice conformable thereto. or other of their Course. For this reason it has not been found necessary to formulate a rule making this imperative. The Clinical Examination stimulates Students to avail themselves of opportunities of practical study.	The College insists on such evidence in every case. All Students in Glasgow, probably without exception, fill the position of Dresser in Hospital at one period	Both Dissections and Operations may be performed during the Examinations. Regulations and Practice conformable thereto as regards Dissections; but the Candidate is not called on to perform operations on the Dead Subject.

SCOTTISH UNIVERSITIES—*continued.*

Conformable - - -	Observations with the Microscope form part of the Examinations of Candidates for Degrees. Has been conformable for many years.	Conformable - - -	Candidates are examined practically in Anatomy and Surgery, and may be called on to perform Dissections.
One of the Examiners is the Professor of the subject in the University; none of the other Examiners are teachers in the school, and with one exception at present, are from other schools.		All the pupils in this school have opportunities of being Hospital Dressers, Clinical Clerks, and all must give evidence of having been Dispensary pupils, or of having been engaged in Practice for at least six months with a Registered Practitioner.	Candidates may be so called on; but it is not customary to require Candidates to dissect at the Examinations, as care is taken in this School that they have dissected the body carefully before the Certificate of Dissection is given.
Conformable. Arrangements are made by which one or other of the Professional Examiners is conjoined with the teacher of the subject. microscopical preparations. The Microscope is also employed by the Examiners in Botany, Zoology, Pathology, Forensic Medicine, and Clinical Medicine.	As already stated, Candidates are examined in Histology by the Professors and Examiners in Anatomy and Physiology. They are also examined in the modes of making and mounting Microscopical preparations. The Microscope is also employed by the Examiners in Botany, Zoology, Pathology, Forensic Medicine, and Clinical Medicine.	Conformable. In addition, the University of Glasgow, acting along with the Managers of the Western Infirmary, have arranged a method of insuring the attendance of Students at <i>post mortem</i> Examinations.	Conformable. In Anatomy, the Students dissect, and they are examined largely on fresh dissections. There is a special Examination on Operative Surgery, and the Student performs one or more operations on the Dead Subject.
Conformable. This Recommendation is heartily approved of.	Conformable - - -	Conformable - - -	This University examines practically in Anatomy and Surgery by the aid of wet and dry preparations.

TABLE showing how far the Regulations and Practice of Medical Licensing Bodies are in accordance

III.—IRISH MEDICAL

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS - - -	<p>That it be recommended to the Licensing Boards not to accept the Certificate of proficiency in General (Preliminary) Education from any of the bodies, the names of which are contained in the list annually circulated, unless such Certificate testify that the Student to whom it has been granted has been examined in the following subjects:—(1) English Language, including Grammar and Composition; (2) Arithmetic, including Vulgar and Decimal Fractions; (3) Algebra, including Simple Equations; (4) Geometry, First two books of Euclid, or the subjects thereof; (5) Latin, including Translation and Grammar; (6) Also one of these optional subjects—Greek; French; German; Elementary Mechanics of Solids and Fluids—meaning thereby Mechanics, Hydrostatics, Pneumatics, and Hydraulics.</p>	<p>That it is desirable that the Examination in General Education be left to the Universities, and such other Bodies engaged in General Education and Examination as may from time to time be approved by this Council; and that it be delegated to the Executive Committee to communicate with the Licensing Bodies on the subject.</p>
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III.—ANSWERS FROM IRISH

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.	Conformable - - - - -	Conformable - - - - -
ROYAL COLLEGE OF SURGEONS IN IRELAND.	<p>This College has always required its candidates to pass an examination in the four subjects specified, and also in Greek, but, fully concurring with the Medical Council in the desire to encourage students to prosecute the study of the Natural Sciences before they enter on studies of a strictly professional character, it will gladly accede to any regulation made by the Medical Council intended to induce all the Licensing Bodies to introduce these subjects, or Modern Languages, into their preliminary examinations.</p>	<p>This College is not disposed to surrender the control over preliminary education of students which it has heretofore exercised, so long as the efficiency of these examinations is not guaranteed by the supervisory powers of the General Medical Council, as are the professional examinations; but it would be willing to act upon the recommendation of the General Medical Council, if a sufficient examination should be established accessible to students without undue cost, and independent of any professional educational body.</p>
APOTHECARIES' HALL OF IRELAND -	<p>The regulations and practice of the Court of the Apothecaries' Hall, Dublin, are in conformity with this recommendation. It requires in addition a knowledge of Greek as one of the <i>compulsory</i> subjects, and only accepts the certificates of those Bodies whose examination in general education includes Greek.</p>	<p>The Court is disposed to leave in future the examination in general education to the Universities, and such other Bodies as may from time to time be approved by the General Medical Council, provided <i>Greek</i> be included in the examination.</p>
UNIVERSITY OF DUBLIN - - - -	<p>The practice of the University of Dublin is not only in conformity with this recommendation, but is considerably in advance of it, inasmuch as the subject of Greek is compulsory on all students, whether students in Arts or not, and the former are required to pass from three to five examinations in Arts before obtaining the license in Medicine, which is the lowest qualification granted by this University.</p>	<p>The University of Dublin does not desire to offer any opinion on the subject of this recommendation.</p>

with the Recommendations of the General Medical Council on Education and Examination—*continued*.

LICENSING BODIES.

ON EDUCATION AND EXAMINATION.

That it be recommended to the various Licensing Bodies to instruct their Examiners in Professional subjects to report to them any case in which decided ignorance in the subjects of General Education has been displayed by the Candidates, with the name of the Board or Boards before which the Preliminary Examinations have been passed; and that the Licensing Bodies be requested to transmit such Reports to the Registrar of the General Medical Council.	No Medical Student shall be registered until he has passed a Preliminary Examination, as required by the General Medical Council, and has produced evidence that he has commenced Medical Study.	The commencement of the course of professional study recognised by any of the Qualifying Bodies, shall not be reckoned as dating earlier than fifteen days before the date of Registration.	The several Branch Councils shall have power to admit special exceptions to the Regulations as to Registration, for reasons which shall appear to them satisfactory.
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MEDICAL LICENSING BODIES.

Conformable - - -	Principle approved by the College; but as this College does not register students, there is no regulation.	Principle approved; but as students in Ireland do not always register at the commencement of their studies, this College has no regulation bearing on the question.	This is not a question affecting the regulations of the College. The College, however, disapprove of any such power as here contemplated being given to the Branch Councils.
The Council of the College assents to the principle of this recommendation, and will be prepared to carry it into effect, as long as it can do so without breach of confidence towards candidates.	The College assents to the principle of this recommendation, but as the registration of medical students in the books of the General Medical Council does not appear to be within the function of this College, it does not see how it can enforce this recommendation.	This recommendation is approved of by this Council.	Approved of by this Council.
The Court has not carried out this recommendation, because of its seemingly invidious character, but will proceed to carry it into effect as soon as the other Medical Bodies agree to do so.	The regulations and practice are in conformity with this recommendation.	The regulations and practice are in conformity with this recommendation.	All such cases are referred to the Branch Councils, in conformity with this recommendation.
The University of Dublin does not desire to offer any opinion on the subject of this recommendation.	The practice of the University of Dublin is now, and has always been, in conformity with this recommendation.	The practice of the University of Dublin is now, and has always been, in conformity with this recommendation.	The University of Dublin does not approve such a power being given to the Branch Medical Councils.

TABLE showing how far the Regulations and Practice of Medical Licensing Bodies are in accordance

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS -	<p>The several Qualifying Bodies are recommended not to admit to the final Examination for a Qualification under the Medical Acts, any Candidate (not exempted from Registration) whose name has not been entered in the Medical Student's Register at least forty-five months previously. In the case of Candidates from other than Schools of the United Kingdom, the Branch Councils shall have power to admit exceptions to this Recommendation.</p>	<p>That the age of twenty-one be the earliest age at which a Candidate shall obtain a license to practice, and that the age shall, in all instances, be duly certified.</p>	<p>That no license be obtained at an earlier period than after the expiration of forty-five months, subsequent to the Registration of the Candidate as a Medical Student.</p>	<p>That the course of professional study required for a license shall occupy at least four years, of which at least three Winter and two Summer Sessions shall be passed at any School recognised by any of the Licensing Bodies mentioned in Schedule (A) of the Medical Act.</p>
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III.—ANSWERS FROM IRISH MEDICAL

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.	See answer to the second Recommendation before this. The College require strict evidence of a candidate having been four years a student, except in case of candidates already qualified.	Not conformable. The vast majority of candidates for the license of the College have already obtained one or more registerable qualifications, and hence the College omitted from their last copy of regulations (1878), any limit as to age.	See answer to recommendation, on commencement of professional study.	Conformable so far as regards lectures; but as to hospital attendance, <i>not</i> conformable, as the College consider that at least <i>three</i> Winter and <i>three</i> Summer Sessions are required.
ROYAL COLLEGE OF SURGEONS IN IRELAND.	The College has always held the opinion that four years is the least period which can be deemed sufficient for acquiring a competent knowledge of the profession, but is aware that students are enabled by the regulations of most Licensing Bodies, and will be able under the present recommendations of the General Medical Council, to present themselves for examination upon a less period of <i>bonâ fide</i> study than even three years.	The Council will be happy to adopt this recommendation, and make it of universal application.	Already answered	Already answered -
APOTHECARIES' HALL OF IRELAND.	The regulations and practice are in conformity with this recommendation.	The regulations and practice are in conformity with this recommendation.	The regulations and practice are in conformity with this recommendation.	The regulations and practice are in conformity with this recommendation.
UNIVERSITY OF DUBLIN -	The practice of the University of Dublin is in conformity with this recommendation.	The practice of the University of Dublin is in conformity with this recommendation.	The practice of the University of Dublin is in conformity with this recommendation.	The practice of the University of Dublin is in conformity with this recommendation.

with the Recommendations of the General Medical Council on Education and Examination—continued.

ON EDUCATION AND EXAMINATION—continued.

That it is undesirable that any Teaching or Licensing Body should insist on the Student taking more than one Course of Lectures on any one subject.	That the following are the subjects, without a knowledge of which no Candidate should be allowed to obtain a Qualification entitling him to be Registered :— (1) Chemistry, including a knowledge of the principles of Chemistry, and of those details of the science which bear on the study of Medicine, and Chemical Physics, meaning thereby Heat, Light and Electricity; (2) Anatomy; (3) Physiology; (4) Materia Medica and Pharmacy; (5) Pathology, including Morbid Anatomy; (6) Medicine, including Medical Anatomy, Clinical Medicine, and Therapeutics; (7) Surgery, including Surgical Anatomy and Clinical Surgery; (8) Midwifery; (9) Forensic Medicine.	That the Council will view with approbation any encouragement held out by the Licensing Bodies to Students to prosecute the Study of the Natural Sciences, before they engage in studies of a strictly professional character.	That a Certificate be required, by each Licensing Body, from every Candidate for its Degree, Diploma, or License to practice Medicine or Surgery, that he has studied Vaccination under a competent and recognised Teacher; that he has himself performed the operation successfully under the Teacher's inspection; that he is familiar with the different stages of the Vaccine Vesicle, and with the methods of preserving Lymph, and that he is thoroughly informed in every necessary part of the subject.
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LICENSING BODIES—continued.

Conformable - - -	Conformable - - - -	No comment - - -	Not conformable. The candidates are usually subjected to strict examination in the subject.
The College cannot approve of this recommendation, or at present undertake to alter its regulations in compliance with it, inasmuch as, in its opinion, certain of the subjects of the curriculum could not possibly be taught in so limited a course of lecture instruction.	All these subjects have long entered into the examinations of the Royal College of Surgeons in Ireland, excepting Midwifery, in which the College holds a special examination, and grants a distinct Diploma.	Already answered - -	The Council of the Royal College of Surgeons in Ireland has adopted the principle of this recommendation, but reserves to itself the function of determining the qualification of Teachers of Vaccination.
The regulations and practice are in conformity with this recommendation, with the exception of "Anatomy and Physiology," of which two courses are required at present, but the Court will require only one in future.	The regulations and practice are in conformity to this recommendation, with the additions of "Botany" and "Hygiene," which are required by the Apothecaries' Hall.	The option of being examined in the subjects constitutes part of the preliminary general education, and questions on these subjects are always set in the printed Papers.	The regulations are in conformity with this recommendation.
The practice of the University of Dublin is in accordance with this recommendation, except in one case, viz., Theoretical and Operative Surgery, in which students are required to attend the same Professor during two years.	The practice of the University of Dublin is not only in conformity with this recommendation, but is in advance of it; inasmuch as students are required to pass an examination in Ophthalmic Surgery, and in Botany, and to give evidence of personal attendance on Midwifery and Fever cases, in addition to the subjects named in the recommendation.	The University of Dublin does not desire to offer any opinion on the subject of this recommendation.	The practice of the University of Dublin is in conformity with this recommendation.

TABLE showing how far the Regulations and Practice of Medical Licensing Bodies are in accordance

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS - -	<p>That such a Certificate as that specified in the foregoing Recommendation should be received by any Licensing Body only from an Institution where the appointed Teacher of Vaccination is recognised by the Local Government Board.</p>	<p>That it is desirable that the different Licensing Bodies, whether singly or in combination, should frame their Examinations so as to secure that the knowledge of every Practitioner whose name appears on the Register shall have been tested in all the subjects of Professional Education which the Council has determined to be essential, viz. :—(1) Chemistry, including a knowledge of the principles of Chemistry, and of those details of the science which bear on the study of Medicine; and Chemical Physics, meaning thereby Heat, Light, and Electricity; (2) Anatomy; (3) Physiology; (4) Materia Medica and Pharmacy; (5) Pathology, including Morbid Anatomy; (6) Medicine, including Medical Anatomy, Clinical Medicine, and Therapeutics; (7) Surgery, including Surgical Anatomy and Clinical Surgery; (8) Midwifery; (9) Forensic Medicine.</p>
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III.—ANSWERS FROM IRISH MEDICAL

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.	Not practicable, as in Ireland no such officer exists. The College approves the principle involved in this Recommendation and the foregoing one.	Conformable except as regards Surgery, in which no examination is held.
ROYAL COLLEGE OF SURGEONS IN IRELAND.	The Council of the Royal College of Surgeons in Ireland has adopted the principle of this Recommendation, but reserves to itself the function of determining the qualification of Teachers of Vaccination.	Already answered - - - -
APOTHECARIES' HALL OF IRELAND -	Such Certificates are receivable only from the Medical Officers approved of by the Local Government Board.	The regulations and practice are in conformity with this Recommendation.
UNIVERSITY OF DUBLIN - - - -	The practice of the University of Dublin is in conformity with this Recommendation.	See Answer to Recommendation on obtaining a registrable qualification.

with the Recommendations of the General Medical Council on Education and Examination—*continued*.

ON EDUCATION AND EXAMINATION—*continued*.

(a) That there be in future three Professional Examinations.

(b) That the Professional Examinations be arranged in two divisions; the first division to embrace the more elementary subjects. The first division may be completed at or before the close of the second year of professional study, but the second division not till the expiration of two years after the passing of the first division, nor before the completion of the fourth year of study. That the Examinations, and the subjects included in each be such, and in such order, as may insure, so far as possible, a due continuity and sequence of study.

That the first division of the Examinations shall include the following subjects :—(1) Chemistry and Chemical Physics ; (2) Anatomy ; (3) Physiology ; (4) Materia Medica and Pharmacy.

That the second division of the Examinations shall include the following subjects :—(1) Pathology, including Morbid Anatomy ; (2) Medicine, including Medical Anatomy, Clinical Medicine, and Therapeutics ; (3) Surgery, including Surgical Anatomy and Clinical Surgery ; (4) Midwifery ; (5) Forensic Medicine.

That it is desirable that an examination in the earlier subjects of professional study should take place before the end of the first year of professional study.

LICENSING BODIES—*continued*.

Conformable, as there are two divisions of the Professional Examination, in accordance with the Recommendation of the General Medical Council of June 1875. The College does not require two years to elapse after the passing of the First Examination. One of these Recommendations seems at variance with the other.

Conformable except so far as regards Surgery. The College would observe that their Examination includes Hygiene.

This is not the practice of the College.

The College has always recognised the expediency of sessional subdivisions of the Professional Examinations, and in 1847,* and from time to time subsequently, has, by its ordinances, sought to give effect to that principle, but found that the want of uniformity of system amongst Licensing Bodies rendered the enforcement of its regulation on this subject impracticable. The College now encourages the student to subdivide his examination. The College concurs in the expediency of establishing an additional examination in preparatory professional subjects, and will be prepared to co-operate in any generally applied system of subdivision of professional examination.

* "Ordinance of Council.—That Sessional Examinations shall be established, to be held each year, in the month of May, whereat such Registered Pupils as desire to present themselves shall be divided into two classes, a senior and a junior.

"That the pupils of the junior class shall be required to have been in attendance in a recognised school during, at least, two winter sessions, and the pupils of the senior class during, at least, three winter sessions.

"That the junior class shall be examined in Anatomy, Physiology, and the elements of Surgery and Medicine; and the senior class in Anatomy, Physiology, Surgery, and Medicine, and the elements of Chemistry and Materia Medica.

"That such pupils as shall pass a Sessional Examination in each of the two classes respectively, to the satisfaction of the Examiners, shall be subjected to but one day's examination upon the final trial for the Letters Testimonial of the College.—7th April 1847."

The Regulations require *two* Professional Examinations, extending over six days.

The arrangement of the Professional Examinations is in accordance with this Recommendation.

The Regulations include all these subjects, and they are divided, in conformity with this Recommendation, into *two* divisions, with the addition of "Botany" to the first division, and of "Hygiene" to the second division.

The Regulations leave this Recommendation to the option of candidates, but very few avail themselves of it.

It is the practice of the University of Dublin to hold four Professional Examinations, viz. :—(1.) Physics and Chemistry ; (2.) Botany and Materia Medica ; (3.) Descriptive Anatomy and Institutes of Medicine (Physiology and Practical Histology) ; (4.) A Final Examination, including Physiological Anatomy, Practice of Medicine, Surgery, Midwifery, Medical Jurisprudence, Institutes of Medicine (Pathology and Hygiene).

The University of Dublin do not see the necessity of adopting this Recommendation.

TABLE showing how far the Regulations and Practice of Medical Licensing Bodies are in accordance

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS	That the Professional Examinations be conducted both in writing and orally, and that they be practical in all branches in which they admit of being so.	That not less than two Examiners shall take part in every Oral and Clinical Examination.	That the questions to be answered in writing should be submitted to the whole body of Examiners for consideration, and revision if desirable, before being proposed to the Candidates.
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III.—ANSWERS FROM IRISH MEDICAL

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.	Conformable - - -	Conformable in Anatomy, Medicine, and in Clinical Examination.	Not conformable - - -
ROYAL COLLEGE OF SURGEONS IN IRELAND.	For many years past this has been the practice of this college.	The practice of this college -	The practice of this college is that each Examiner sends his questions to the Chairman of the Court, who, after ascertaining that no two questions are identical, sends them to the printer.
APOTHECARIES' HALL OF IRELAND.	The regulations and practice are in conformity with this Recommendation.	The regulations and practice are in conformity with this Recommendation.	The questions to be answered in writing are submitted for consideration and revision, if desirable, to the Examiners who are considered experts in the several subjects, before they are proposed to the candidates.
UNIVERSITY OF DUBLIN	The practice of the University of Dublin is in conformity with this Recommendation.	The practice of the University of Dublin is in conformity with this Recommendation.	The University of Dublin consider that there would be great practical difficulty in carrying out this Recommendation.

with the Recommendations of the General Medical Council on Education and Examination—*continued*.

ON EDUCATION AND EXAMINATION—*continued*.

That the written answers should be submitted to more than one of the Examiners.	That excellence in one or more subjects should not be allowed to compensate for failure in others.	That the Professional Examinations be held by the several Licensing Bodies, except in special cases, at stated periods, to be publicly notified.	That returns from the Licensing Bodies in Schedule (A.) be made annually, on the 1st of January, and in a prescribed form, to the General Medical Council, stating the number of the Candidates who have passed their First as well as their Second and Third Examinations, and the number of those who have been rejected at the First and Second and Third Examinations respectively.
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LICENSING BODIES—*continued*.

Not the practice of the college	Conformable, so far as that excellence in one or more subjects does not compensate for failure in an important subject.	Conformable - - -	Conformable.
The practice of this college in all doubtful cases.	- - - Both are rules of this college	- - -	This Recommendation has been adopted and carried out by this college.
The written answers, together with the results of the Oral Examinations, are referred to <i>all</i> the Examiners before the final decision is taken as to the merits of the candidates.	The regulations and practice are in conformity with this Recommendation.	The regulations and practice are in conformity with this Recommendation.	The regulations and practice are in conformity with this Recommendation.
The University of Dublin consider that there would be great practical difficulty in carrying out this Recommendation.	The University of Dublin consider this Recommendation too vague to offer any opinion on.	The practice of the University of Dublin is in conformity with this Recommendation.	The practice of the University of Dublin is in conformity with this Recommendation.

TABLE showing how far the Regulations and Practice of Medical Licensing Bodies are in accordance

GENERAL MEDICAL COUNCIL'S RECOMMENDATIONS

RECOMMENDATIONS	That it is not desirable that any University of the United Kingdom should confer any degree in Medicine or Surgery, whether that of Bachelor, Doctor, or Master, upon Candidates who have not graduated in Arts, or passed all the Examinations required for the Bachelorship in Arts, or passed, after due course of Education, Examinations, such as are <i>bond fide</i> , academically equivalent to those required for a Degree in Arts.	That, in the opinion of the Council, it would be desirable, as a general rule, that none of the Higher Degrees or Qualifications in Medicine or Surgery should be conferred on persons who have not shown evidence of higher professional attainments.	That it is desirable that in the Examinations on several of the subjects of the Curriculum, such, for example, as Chemistry, including Chemical Physics, Physiology, and Materia Medica, the Licensing Bodies should limit and define by Schedule the extent of Examination.
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III.—ANSWERS FROM IRISH MEDICAL

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.	This is not a question bearing upon the regulations of the College. The College highly approve the Recommendation down to "or passed," line 10, as they strongly object to the alternative therein set forth.	The practice of the College	Impracticable
ROYAL COLLEGE OF SURGEONS IN IRELAND.	The College deplores very much that this rule is not adopted by all Universities, and would strongly urge the General Medical Council to make it compulsory.	The College has for many years insisted on further examination for its higher qualification, except when conferred <i>honoris causa</i> , and deprecates the granting of higher degrees under any other circumstances.	The College has hitherto left such details very much to the discretion of its Examiners, but reserves to itself the power to define the nature and extent of the Examination if necessity should arise.
APOTHECARIES' HALL OF IRELAND.	The Court approves of this Recommendation.	The Court concurs in this opinion.	The Examinations in all the subjects of the curriculum are limited to questions that bear chiefly on the study and practice of the profession; but the precise <i>extent</i> of the Examinations has not been defined by Schedules.
UNIVERSITY OF DUBLIN	The University of Dublin have long acted in conformity with the first part of this Recommendation, but disapprove the alternative stated in the last clause.	The Practice of the University of Dublin is in conformity with this Recommendation.	The University of Dublin consider this Recommendation to be unadvisable.

with the Recommendations of the General Medical Council on Education and Examination—*continued.*

ON EDUCATION AND EXAMINATION—*continued.*

That it be recommended that in no case should the examination of a Candidate by any of the Licensing Bodies, in any subject, be conducted wholly by the Lecturer or Teacher in that subject in the School in which the Candidate has been elected.	That it is desirable that observation with the Microscope should form part of the Examinations of Candidates for a License.	That it be recommended that Candidates for the final Professional Examination be required to give evidence that they have had opportunities of practical study, with care of patients, as Pupil, Assistant, Clinical Clerk, or Dresser, in Hospital, Dispensary, or elsewhere.	That it is desirable that in Examinations in Anatomy, Candidates should understand that they may be called upon to perform actual Dissections, and that Candidates in Examinations in Surgery should understand that they may be called upon to perform one or more Operations on the Dead Subject.
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LICENSING BODIES—*continued.*

Approved by this College	Conformable	Approved. Owing, however, to the great difficulties in carrying it into effect, it is not required by the College for its License, though it is for its Membership.	Conformable so far as Anatomy is concerned; and the College are strongly of opinion that Examinations in Anatomy and Surgery should, <i>without exception</i> , test every Candidate in performing Dissections, and in operating, respectively.
A bye-law of the College specially excludes Lecturers and Teachers from the Court of Examiners. The policy of this regulation is, however, open to question.	Such has been the practice of this College for some time.	This subject has frequently been under the consideration of this Council; the matter is, however, beset with difficulty, owing to limited accommodation in the hospitals; but the Examinations of this College, being conducted partly at the bedside, and the students being tested in the use of surgical appliances, the teaching is compelled to be practical.	For some years past every Candidate has been called on in this College, at his Anatomical Examination, to perform actual dissections, and at his Surgical Examination to perform two or more operations on the Dead Subject. The present Recommendation of the General Medical Council was carried as an amendment to a resolution proposed by the Representative of this College, which was of a mandatory character. This College has already expressed its regret that the General Medical Council did not see their way to adopt the proposed resolution.
The Regulations and Practice are in conformity with this Recommendation.	The Regulations and Practice are in conformity with this Recommendation.	The Regulations and Practice are in conformity with this Recommendation.	The Regulations are in conformity with this Recommendation.
The Practice of the University of Dublin is in conformity with this Recommendation.	The Practice of the University of Dublin is in conformity with this Recommendation.	The University of Dublin consider this Recommendation impracticable, owing to the present arrangement of Hospitals, over which the University of Dublin has, in the majority of cases, no control.	The Practice of the University of Dublin is not only in conformity with this Recommendation, but is in advance of it; inasmuch as at the Examinations in Anatomy Candidates are <i>always</i> required to perform Dissections, and at those in Surgery usually two operations on the Dead Subject.

PAPER (B).

PROCEEDINGS of the EXECUTIVE COMMITTEE of the MEDICAL COUNCIL in regard to
CORRECTIONS of the "MEDICAL REGISTER."

(a.)—ABSTRACT of a REPORT presented by the REGISTRAR to the COMMITTEE on 30th January 1880, in regard to (a) Typographical Improvements, and (b) Corrections of Entries and Designations, in the published "MEDICAL REGISTER" for 1880, concluding with (c) Suggestions to the COMMITTEE for their authorization of certain further Improvements in the Volume.

(a.) Observing (as an opening at random in former volumes will show) that the pages of the "Register," as hitherto printed, contained hardly any margins whatever, that the back margins were so close to the binding as to make it difficult to read the names in the "Register" proper, or the beginnings and endings of the lines in the prefixed Medical Acts; and that in the front margins the rubrics in the Acts, and some words in the qualification column, were not unfrequently cut off; the Registrar made a careful investigation as to the best remedy for this undesirable state of the official volume under his care, and found that, by very slightly narrowing the columns, not only was this set right, but other improvements in appearance of the pages were also obtained thereby. Furthermore, the introduction of a running heading over the pages that contain the 12 Medical Acts shows at a glance (what could not previously be seen) what particular Act an opened page displays.

(b.) As to correctness of entries, methods now thoroughly and systematically carried out have secured the same degree of accuracy as would have been obtained by sending, as to addresses and qualifications, letters of inquiry to every practitioner enrolled in the "Register." As regards the entries in the "residence" column, for officers in the Medical Departments of the Army and Navy, the Registrar has long felt it highly desirable to reduce to a uniform system the multifarious (mostly incorrect) designations hitherto used; such, for instance, as will be clearly seen by taking, at random, in former editions, names (say) from Muir to Munro. Accordingly, with a view to correct these inaccuracies, and thus bring the entries under some uniform system, the Registrar wrote to the Army, Navy, and India Offices, and subsequently went and discussed the subject with the Directors-General, the result whereof being that certain general and invariable designations for the officers in the said several departments were suggested at the interviews, and afterwards, at the Registrar's request, formally sent in the appended letters.

(c.) As a consequence, there are now submitted to the Committee, for the further improvement of the "Register," the following suggestions:—

I.—To authorise the Registrar to bring the entries of officers in the Army and Navy into accord with the official designations set forth in the appended letters.

II.—To authorise the Registrar to alter the heading of the second column of the "Register" from "Residence" to the more appropriate word "Address." On taking legal opinion as to whether this change is allowable, and directing attention, among other reasons, to the words "to the like effect" in Section 27, line 5, of the Medical Act (1858), the Council's legal adviser states that it is allowable, and writes thereon the appended letter.

Should the Committee think fit to sanction these improvements, there is every reason to believe that the forthcoming edition of the "Register" (now nearly ready) will—in typographical appearance, uniformity of entries, accuracy, and completeness—be all that such a volume ought to be.

(b.)—RESOLUTION passed by the EXECUTIVE COMMITTEE, in consequence of Suggestions submitted in the foregoing REPORT.

The Registrar submitted to the Committee the following suggestions for the further improvement of the published 'Medical Register,' in its forthcoming edition for 1880:—

Suggestion I.—To authorise the Registrar to alter the heading of the second column of the "Medical Register" from "Residence" to the more appropriate word "Address."

On taking legal opinion as to whether this change is allowable, and directing attention, among other reasons, to the words "or to the like effect" in Section 27, line 5, of the Medical Act (1858), Mr. Ouvry writes thereon the following letter:—

"12, Queen Anne-street, Cavendish-square,

"20 January 1880.

"My dear Sir,
 "I think the alteration you suggest, viz., the substitution of 'Address' for 'Residence,' is within the powers of the Council, especially as in the Medical Act (1858), Section 14, the Registrars are to alter the 'Addresses,' and are to write letters according to the 'Address' in the 'Register.'

"W. J. C. Miller, Esq."

"Yours, &c.
 (signed) "Frederick Ouvry."

Suggestion II.—To authorise the Registrar to bring, in the second or Address column of the "Medical Register," the entries of officers in the Army and Navy into accord with the official designations set forth in the following letters:—

(a.) LETTER from the Navy Medical Department.

Sir,

Admiralty, 16 January 1880.

I have to acknowledge the receipt of your letter of the 14th instant, regarding the designation in the "Medical Register" of officers in the Medical Departments of the Army and Navy, and to inform you that I see no objection to the general designation of "Naval Medical Service" being adopted in the "Medical Register" against the names of Naval medical officers, instead of stating the rank of each officer as at present.

The Registrar of the General Medical Council.

I am, &c.
 (signed) A. Armstrong,
 Director General.

(b.) LETTER from the Army Medical Department.

Sir,

War Office, 19 January 1880.

I have the honour to acknowledge your letter of the 14th instant, with enclosures, and in reply to inform you that, as far as my opinion goes, it would be the simplest and best plan to designate all Army medical officers in the "Medical Register" as of the "Army Medical Department."

Should a designation by rank recommend itself to the Medical Council, the varying ranks will always be found either in the full-pay or half-pay section of the successive Army Lists.

As regards the list of names enclosed in your letter under acknowledgment and in your previous communication, reference has been made to that branch of the office which deals with officers on half-pay.

The Registrar of the General Medical Council.

I have, &c.
 (signed) W. M. Muir,
 Director General.

(c.) LETTER from the India Office.

Sir,

India Office, 22 January, 1880.

I am directed by the Secretary of State for India in Council to acknowledge the receipt of your letter of the 21st instant, and to acquaint you in reply, that the exact official designation of surgeons in the Indian Medical Service is "Indian Medical Department," with the name of the Presidency added in brackets.

The Registrar of the General Medical Council.

I have, &c.
 (signed) A. B. Johnson, Colonel,
 Military Secretary.

EXECUTIVE COMMITTEE'S Resolution:—"That the foregoing suggestions by the Registrar be approved of, and that he be directed to carry out the specified improvements in the 'Register.'"

[*N.B.*—The above-specified improvements have all been carried out in the "Medical Register" for 1880, copies of which were laid on the Table at the Select Committee's meeting on 8th March 1880.]

PAPER (C).

CASES, with COUNSEL'S OPINIONS thereon, with respect to the REGISTRATION CLAUSES of the MEDICAL ACT (1858), with other documents, illustrative of certain insuperable difficulties in regard thereto.

(a.) CASE, with COUNSEL'S OPINION thereon, respecting the mode of making Entries in the "MEDICAL REGISTER" under the MEDICAL ACT (1858), read before the GENERAL MEDICAL COUNCIL on 17th June 1875, and entered in the Council's Minutes.

CASE.

A question has arisen as to the mode of making entries on the Medical Register under the Medical Act (1858).

By that Act, Section 3, the General Council of Medical Education and Registration of the United Kingdom is established, and Branch Councils for England, Scotland, and Ireland respectively formed thereout.

By Section 10, the General Council is to appoint a Registrar, and the person so appointed is also to act as Registrar for England.

By Section 11, the Branch Councils for Scotland and Ireland are in like manner respectively to appoint a Registrar.

By Section 14, it is the duty of the Registrars to keep their respective Registers correct, to erase the names of persons who shall have died, and to make the necessary alterations in the address or qualifications of the persons registered.

By Section 15, persons possessing any one or more of the qualifications required by the Act are entitled, on payment of a fee, to be registered, on producing to the Registrar of the Branch Council for England, Scotland, or Ireland, evidence of his qualification.

By Section 25, where any person entitled to be registered applies to the Registrars of any of the Branch Councils for that purpose, the Registrar is forthwith to enter in a Local Register, in a form prescribed, the name and place of residence, and the qualification or several qualifications in respect of which the person is entitled to be registered, and the date of registration; and the Registrars for Scotland and Ireland are forthwith to send a copy of the entry so made to the Registrar of the General Council, and such last-mentioned Registrar is to cause the same forthwith to be entered in the General Register, and is also forthwith to cause all entries made in the Local Register for England to be entered in the General Register.

By Section 26, no qualification is to be entered on the Register either on the first registration, or by way of addition to a registered name, unless the Registrar be satisfied by proper evidence that the person claiming is entitled to it; and any appeal from the decision of the Registrar may be decided by the General Council or by the Council for England, Scotland, or Ireland, as the case may be.

By Section 27, the Registrar of the General Council is yearly to print and publish, under the direction of such Council, a correct Register of the names, in alphabetical order, according to the form given in Schedule D. Such Register is to be called the Medical Register, and the printed copies are made evidence.

The question raised is whether additions to registered names, such as change of residence, or of additional qualifications, or alterations, such as striking out the name of any person deceased, can be made by the General Registrar at once in the General Register, or whether such additions or alterations must be first made in the Local Register in which the person was first registered, and thence transferred to the General Register.

The first course has, in practice, been adopted on the ground of convenience, and on the supposition that when a person has once been entered on the General Register he ceases to have anything to do with the Local Register, and is entitled to apply direct to the General Registrar to have the necessary alterations at once made in the General Register.

It is, however, contended that this is not the true construction of the Act, because it is clear that the original application for registry must be made to a Branch Registrar (Section 15); and, by Section 26, no distinction is made between original and additional entries, and that, on the construction of that section, the word "Registrar" must mean Branch Registrar.

It is further contended that the entry of an addition must be made in the Local Register, because, by Section 16, it is the duty of the respective Registrars to keep their Registers correct, and that it is impossible for them to do so if additional entries are made at once in the General Register, there being no obligations cast on the General Registrar to communicate such entries to the Branch Registrars.

On this point Counsel is requested to advise.

OPINION.

By Section 45 of the Act, notice of deaths is to be given both to the Branch and the General Registrar, and both are bound to reform their Registers accordingly. With regard to all other alterations and additions, the duty of both General and Branch Registrars is to keep their respective Registers correct as to addresses (Section 14), and indeed as to other matters. In the same way, I think, under Section 30, that the application to amend the Register by the insertion of subsequent qualifications, may be made either to the Branch or to the General Registrar, and that either of them to whom such application is made will discharge his duty by complying with it. I do not think, therefore, that it is necessary that the application should be made to the Branch Registrar first or to the General Registrar first. The requisition may be addressed in the first instance to either, and either is bound on such requisition to put himself in motion. Section 26 appears to me, on the true construction of it, to favour the view that questions of subsequent addition to the Register might come in the first instance before the General Registrar, for it is otherwise not easy to explain the provision as to appeals; and as the term "Register" in Section 26 means "the Local or General Register, as the case may be," such is, I think, also its meaning in Section 20. The difficulty of interpreting the various sections of the Act diminish, if the construction which I have suggested be adopted, and if it be taken to have been the intention of the Act that such application might be made indifferently to either Branch or General Registrar. Although practical convenience may be thought to be in favour of compelling amendments and additions to be made in one uniform way, nevertheless I have therefore come to the conclusion that this is not the intention of the Act; and that applications for that purpose under Section 30 may lawfully be made in the alternative either to the General Registrar or to the Branch Registrars.

14 December 1874.

(signed) Charles Bowen.

(b.) LETTER from the BRANCH MEDICAL REGISTRAR for *Ireland*, read before the EXECUTIVE COMMITTEE on 3th January 1879, and inserted in the Committee's Minutes:—

"Branch Medical Council (Ireland).

"35, Dawson-street, Dublin, 7 January 1879.

"Sir,

"I AM directed by the Branch Medical Council for Ireland again to request the attention of the Executive Committee to the numerous discrepancies that exist between the entries in the Local Register for Ireland and those in the General Register, which should be identical, caused by the practice followed in the London office of making additions to, and alterations in, registrations originally effected in the office of this Council, and erasing such registration from the General Register without the authority of the Local Registrar for Ireland.

"The attention of the Branch Council has been recently drawn to this matter in consequence of an advertisement which lately emanated from the London office, whereby practitioners in general were requested to send notices of change of residence direct to that office, in order that corresponding alterations might be made in the General Register.

"The Branch Council are well aware of the opinion obtained from Mr. Bowen in 1875, which has given a colourable sanction to this proceeding, to which they then objected, and still do object. For, whilst the practice cannot be advocated on the plea of its greater convenience to practitioners, or of its ensuring greater accuracy in the Medical Register, it is most objectionable on the grounds of its removing all proper responsibility from the officials whose duty it is 'to keep their respective Registers correct in accordance with the provisions of the Medical Act, and the Orders and Regulations of the Medical Council.'—(Sect. 14.)

"Whilst the Branch Council dissent from the views expressed by Mr. Bowen on this matter, notwithstanding the reasons he has stated, they believe that he has entirely overlooked the important provisions in the Medical Act regulating the financial arrangements of the Medical Council, which clearly point to an opposite conclusion. Thus, by Sections xv and 25 all fees for original registrations must be paid to one of the three local Registrars, not to the General Registrar; by Section 30. qualifications, in addition to those previously registered, may be made on payment of the authorised fee, such fee being payable (as will presently appear) not to the General Registrar but to one of the Local Registrars.

"The Branch Council having thus acquired funds, the Act provides, in Section 13 that the treasurers of each Branch Council shall, periodically, account for all fees received by them respectively; and shall pay, rateably, to the treasurer of the General Council, out of such fees, sums sufficient to defray the expenses of such General Council. No provision exists whereby the Registrar of the General Council is authorized to receive, or its treasurer to account for, registration fees; consequently, all registrations for which fees are payable must be primarily made by one of the three local Registrars, and then communicated to the General Registrar, to be by him entered in the General Register.

"The offices of General Registrar and local Registrar for England being held by the same person, it is presumed that the fees which have been heretofore paid to him for registering additional qualifications of practitioners, originally registered in Scotland or Ireland,

Appendix, No. 3. have been improperly placed to the credit of the Branch Council for England, and a receipt for such fees given in their name, although such qualifications could not possibly be entered as additions to previous registrations in the English Local Register.

“ For these considerations, it clearly appears to this Branch Council to be beyond the powers of the General Registrar to make any entry in the General Register until it shall have been first effected in one of the three local Registers ; and to be also outside his province to make any alteration or erasure in such General Register until it shall have been made in one of the Local Registers.

“ Mr. Bowen appears to have relied upon Section 26 in support of his opinion, on account of its enacting that any appeal from the decision of the Registrar, as regards additional registrations, may be decided by the General Council as well as by one of the Branch Councils, as the case may be ; and he, therefore, supposes that additional registrations may be made direct by the General Registrar. But it is to be observed that the same powers of appeal are given in that section to the General Council as regards first registrations, notwithstanding that by Sections 13 and 25 the local Registrars are alone competent to effect such first registrations.

“ The Branch Council, therefore, trust that the Executive Committee will concur with them in the expediency of requiring that all entries, alterations, and erasures, shall first be made in the local Registers in which the registration was originally effected before being made in the General Register, a course of proceeding in conformity with the Standing Orders of the General Council, and which will be certain to keep the General and local Registers in strict correspondence, and definitely settle the responsibility of the respective Registrars.

“ I am, &c.
(signed) “ W. E. Steele,
“ Local Registrar for Ireland.”

“ W. J. C. Miller, Esq., General Registrar.”

(c.) LETTER from the BRANCH MEDICAL REGISTRAR for *Ireland*, read before the EXECUTIVE COMMITTEE on 16th July 1879, and inserted in the Committee's Minutes :—

My dear Sir,

35, Dawson-street, Dublin, 17 June 1879.

I AM directed by this Branch Council to request that you will be so good as to call the attention of the Executive Committee to their letter of the 7th January, and to beg that they will be so good as to favour this Council with a reply to that communication.

W. J. C. Miller, Esq., Registrar.

Yours, &c.
(signed) W. E. Steele, Registrar.

(d.) RESOLUTION passed by the EXECUTIVE COMMITTEE on 16th July 1879, in regard to the subject of the two preceding Letters :—

Resolved :—“ That, in answer to Dr. Steele's letter, the Registrar be directed to state that the Executive Committee feels bound to abide by the legal opinion thereon from Mr. Bowen in 1875.”

(e.) COMMUNICATIONS from the BRANCH MEDICAL COUNCIL for *Ireland*, in regard to the Mode of making Entries in the “ MEDICAL REGISTER,” read before the EXECUTIVE COMMITTEE of the MEDICAL COUNCIL on 28th November 1879, and entered in the Committee's Minutes :—

(a.) LETTER from the IRISH BRANCH REGISTRAR.

Sir,

35, Dawson-street, Dublin, 30 October 1879.

I AM directed by this Branch Council to transmit to you, for the information of the Executive Committee, the accompanying copy of a case, with the opinion of the Solicitor General for Ireland thereon, relative to the practice, adopted in the London office, of registering additional qualifications, and of making alterations in the General Register, without their being effected in the first instance in one of the local Registers.

The opinion of the Solicitor General being quite decided as to the irregularity, if not the illegality, of inserting additional qualifications in the General Register before they are made in one of the local Registers, the Branch Council for Ireland presume that the practice will be discontinued. But although the Solicitor General is of opinion that the Act does not require that changes of address, or erasures under the 14th section of the Medical Act, should be made in the first instance in a local Register, yet, as he states that it is within the province of the General Council to make orders and regulations in reference thereto, this Branch Council would suggest that steps, as indicated by the Solicitor General, to restore and maintain

maintain the conformity of the General to the Local Registers, should be at once taken; and that the General Registrar be instructed not to send to registered persons any letters of inquiry, such as are authorised by the 14th section of the Act, but to leave such duty to be performed by the local Registrars respectively, a course which is in accordance with the standing orders of the General Council, chap. 13, sections 8, 10, and 11.

Appendix, No. 3.

W. J. C. Miller, Esq.,
Registrar of the General Medical Council.

I am, &c.
(signed) W. E. Steele, Registrar.

(f.) CASE on behalf of the BRANCH MEDICAL COUNCIL (*Ireland*) for the Opinion of Counsel.

A DIFFERENCE of opinion has arisen between the General Council, London, and the Branch Medical Council (*Ireland*) as to the mode of making entries in the "Medical Register" under the Medical Act, 1858, upon which the Branch Medical Council (*Ireland*) are desirous to obtain the opinion of counsel.

By the Medical Act, 1858, Section 3, the General Council of Medical Education and Registration of the United Kingdom is established, and Branch Councils for England, Scotland, and Ireland respectively are formed thereon.

The 10th section of the Act provides for the appointment of a Registrar, who is to act as Secretary of the General Council, and who may also act as Treasurer, unless the Council shall appoint another person or other persons as treasurer; and the person so appointed shall likewise act as Registrar in England, and as secretary and treasurer for the Branch Council for England.

The 11th section of the Act in like manner empowers the Branch Councils for Scotland and Ireland to appoint a Registrar and other officers.

The 14th section of the Act defines the duty of the Registrars, and to this section the particular attention of counsel is requested. They are to keep their respective Registers correct, and to erase the names of persons who shall have died, and from time to time to make the necessary alterations in the address or qualifications of the persons registered under said Act.

Under that section the Registrar is required to send to registered persons a letter inquiring whether they had changed their residence or ceased to practise, and to act upon the reply or non-reply, as the case may be. It appears to querists, however, that it is not the intention of the Act that letters to the like purport should be sent to the same individual by the General Registrar as well as by one of the Branch Registrars—a proceeding by which postage would be doubled, and uncertainty in the mind of the individual as to which Registrar he should address his reply, be produced. If he did not reply to either of them, he rendered himself liable to have his name erased by the other from either the General or the Local Register, as the case might be. To remove this objection it ought to be decided whether such letters of inquiry should be sent by the General Registrar, or by the Branch Registrar by whom the individuals were respectively registered.

By Section 15 it is declared that every person then possessed, and every person thereafter becoming possessed, of any one or more of the qualifications described in the Schedule A. to said Act shall, on payment of the fees therein mentioned, be entitled to be registered on producing to the Registrar of the Branch Council for England, Scotland, or Ireland the document conferring or evidencing the qualification, or each of the qualifications, in respect whereof he seeks to be registered.

The next section of importance is the 25th section.

By that section it is provided that where any person entitled to be registered under said Act applies to the Registrar of any of the said Branch Councils for that purpose, such Registrar shall forthwith enter in a Local Register, in the form thereby prescribed, and to be kept by him for that purpose, the name and place of residence, and the qualification or several qualifications in respect of which the person is so entitled, and the date of the Registration; and shall, in the case of the Registrar of the Branch Council for Scotland or Ireland, with all convenient speed, send to the Registrar of the General Council a copy, certified under the hand of the Registrar, of the entry so made, and the Registrar of the General Council shall forthwith cause the same to be entered in the General Register; and such Registrar shall also forthwith cause all entries made in the Local Register for England to be entered in the General Register, and the entry in the General Register shall bear date from the Local Register.

It hence appears that the General Register, so far as first registrations are concerned, is necessarily an exact copy of the original entries in the three Local Registers.

By the 26th section it is provided that no qualification shall be entered on the Register either as a first registration or by way of addition to a registered name, unless the Registrar be satisfied by the proper evidence that the person claiming is entitled to it; and any appeal from the decision of the Registrar may be decided by the General Council, or by the Council for England, Scotland, or Ireland, as the case may be.

The 27th section provides that the Registrar of the General Council shall in every year cause to be printed, published, and sold, under the direction of such Council, a correct register of the names in alphabetical order, in the form set forth in the schedule, containing

Appendix, No. 3. the names, residences, dates, and particulars of degrees, &c., and such Register shall be called the "Medical Register," and a copy of the "Medical Register" for the time being, purporting to be so published as aforesaid, shall be evidence in all courts, &c., that the persons therein specified are registered according to the provisions of the said Act.

The questions arising under the section above quoted are respecting the duties and powers of the General Registrar as to inserting changes of residence, or of additional qualifications or alterations, such as striking out the name of any person deceased; and whether such changes can be made by the General Registrar at once in the General Register, or whether such additions or alterations must not be first made in the Local Register in which the person was originally registered, and then transferred to the General Register.

The attention of the Branch Council (Ireland) was called to the numerous discrepancies which exist between the entries in the Local Register of Ireland and those in the General Register, and it was subsequently ascertained that the General Registrar in the London office was in the habit of making additions to, alterations in, and erasures of registration in the General Register originally effected in the Dublin office of the Branch Medical Council (Ireland), without the knowledge or authority of the Local Registrar for Ireland.

Querists, however, contend that this practice is not in accordance with the intention of the Act; because, as the original application for registration must be made to a Branch Registrar (Section 15), and by Section 26 no distinction is made between original and additional entries, the word "Registrar" used in that section must mean "Branch Registrar."

The system so adopted by the London office has thrown the books of the Branch Council for Ireland into confusion, and has destroyed the uniformity in the entries in the Local Register for Ireland and the General Register, which querists believe should, in accordance with the Act, subsist.

It is submitted that, should the production of the Local Register be required in a court of law, the discovery that discrepancies to a considerable number exist between it and the copy of the General Register, as published, might lead to serious inconvenience.

When querists called the attention of the General Council to the matter, that Council took the opinion of Mr. Bowen, of London, the barrister who acts for them. But querists cannot assent to his views, and counsel will see their reasons for dissenting from his conclusions, given in Dr. Steele's letter of 7th January 1879, herewith sent.

(See "Case and Opinion of Mr. Bowen," p. 157-59 of Minutes of the Medical Council, also sent herewith.)

Querists further submit that the entry of an addition, change of residence, or erasure of a name, must be made in the first instance in one of the Local Registers; because, by Section 16, it is the duty of the respective registrars to keep their registers correct; and it is impossible for them to do so if additional entries or other alterations are made primarily in the General Register, there being no obligation cast on the General Registrar to communicate such entries or alterations to the branch registrars.

Counsel will be so good as to give the foregoing case his best attention, and advise the Branch Medical Council, Ireland, whether—

Question 1. It is not contrary to the intention, if not the letter, of the Act for the Registrar of the General Council to enter in the manuscript general register additional qualifications and alterations of residence after any name in that register, or to erase any name therefrom, under the 14th section of the Act, before such alteration, addition, or erasure has been made in one of the local registers and communicated to him by a local registrar.

Answer 1. In replying to this query, it is necessary for me to draw a distinction between, on the one hand, the registration of additional or substituted qualifications, under the 30th section of the Act, and, on the other hand, the erasure of names of persons who have died or whose names have been directed to be erased under the 29th section, and the erasure of qualifications under the 28th section, and the alterations of residence. As to the first-mentioned class, the registration of additional or substituted qualifications, I am of opinion that it is both the intention and in accordance with the true construction of the Act that the alteration should be made in the first instance in the local register, and that it should only be inserted in the General Register when the entry has been duly certified to the Registrar of the General Council by the branch registrar. My reason for coming to this conclusion is: (*a.*) Because, as the very object (*see* Preamble) of the Act is to distinguish qualified from unqualified practitioners, and as the essential part of the registration is the qualification, any change therein amounts to a new registration, and should be effected in the same way as an original registration. (*b.*) Because the statute contemplates the payment of a fee for the entry of such change of qualification, and it is clear that such fee can only be paid to the branch registrar; if paid to the General Registrar it could not be applied towards the discharge of its expenses, as these must be defrayed by the percentage rate (13th section); and the registrar ought not to keep it for his own use, as he is paid by salary (10th section). (*c.*) Because the terms of the 30th section seem to point to the change being made in the register in which the original registration was made; and (*d.*) because, upon the principle that the entry of the new or additional qualification is a new registration, the provisions of the 25th section as to certifying it to the General Registrar are applicable. I cannot regard the provision of the 26th section as to appeals as an argument against this view, as I am of opinion that by the true construction of that section the appellant has in all cases the choice of two tribunals,

tribunals, either the General Council or the Branch Council to which he has made application to be registered. Appendix, No. 3.

As to the second class of entries referred to, at the commencement of this opinion, that is, entries of changes of residence and erasures of names or qualifications, I am of opinion that such alterations may be made in the first instance by either the local or General Registrar. These changes do not amount to a new registration, and no fees are payable therefor. I think that the 45th section makes it clear that an erasure upon death may be made in either register; and I cannot confine the term "Registrar," in the 28th and 29th sections, to the branch registrar. There is no provision in the Act directing the branch registrar to certify such alterations to the General Registrar; and I am of an opinion that, as regards these matters, the intention of the Act was to permit the entry to be made in the first instance in either register, leaving it to the General Council to make rules and regulations (*see* 14th section) providing that the respective registrars should certify such alterations to each other, and thus to ensure uniformity between the general and local registers.

Question 2. Whether, the General Register being a mere copy, compiled from the entries in the three local registers, the words in Section 26, "qualification by way of addition to a registered name," or the words, "qualification inserted in the register in substitution for or in addition to the qualification previously registered," do not mean a qualification to be added after the name as it stands in one of the local registers, in which alone, in point of fact, it has been "registered," and cannot mean addition to the copy of a name, or a qualification, as it stands in the General Register.

Also whether in the same section the word "Registrar" does not mean "one of the Branch Registrars."

Answer 2. I have in effect already replied to this query. I am of opinion that "Register" in the 30th section means "Branch Register," and "Registrar" in the 26th section means "Registrar of a Branch Council."

Question 3. Whether under the Medical Act the General Registrar, or the treasurer of the General Council, is authorised to receive fees for the registration of additional or any qualifications, or whether such fees should not be received or accounted for by the treasurers or Registrar of one of the Branch Councils.

Answer 3. I am of opinion that the Registrar or treasurer of the General Council is not entitled to receive any fees for the registration of additional or any qualifications; all fees are payable to the Local Registrars.

Question 4. In case counsel should be of opinion that the entries in the General Register should be exact copies of those in the Local Registers, he will please advise how such uniformity should be restored as regards existing registrations, bearing in mind that the Act does not provide that any Local Registrar shall alter the Register in his custody upon the requisition of the General Registrar; and he will please say whether there is any and what means by which the General Registrar can be required to send to the Local Registrars the original documents, such as letters, certificates, or requisitions, upon which such alterations, additions, or erasures have been made in the General Register, so as to enable the Local Registrar to make corresponding alterations in the Local Register, such being the only method by which (as it seems to the querists) uniformity in the two records can be properly restored, as well as to remit to the querists the fees that have been heretofore improperly received by him for additional registrations.

And Counsel will please advise generally on the case for the guidance of the querists.

Answer 4. I have already indicated that, in my opinion, the General Council may make orders and regulations, providing that the General Registrar and Branch Registrar shall respectively certify to each other the changes of residences and erasures of names made by each; and that upon such certificates being received, corresponding changes shall be made in their respective Registers. If such regulations are now made, and it is determined that hereafter additional or substituted qualifications must in the first instance be registered in the Local Register, there will be no difficulty in working the Act for the future; but, unless by an arrangement with the General Council, I do not see any way by which the documents upon which the alterations in the General Register heretofore made have been founded can be obtained by the Local Registrars, so as to enable them to make corresponding changes in their Registers, or by which the fees heretofore received by the General Council can be secured by the Branch Councils. There is no legal procedure by which this could be effected.

3, Fitzwilliam-place, 25 October 1879.

(signed) *Hugh Holmes.*

Appendix, No. 3.

(g.) RESOLUTIONS passed by the EXECUTIVE COMMITTEE at its Meeting on
28th November 1879.

Resolution 1 :—" That the opinions of Mr. Bowen and the Solicitor General for Ireland, in regard to registration, be placed in the hands of Mr. Ouvry, and that he be requested to submit both opinions to Counsel, for the guidance of the Medical Council."

Resolution 2 :—"The attention of the Committee having been called to the following advertisement (β), inserted in the medical journals in juxtaposition with the General Council's usual yearly advertisement (α), as amended by the Committee in October 1878 :—

Resolved :—" That the Registrar be directed to forward a copy of both advertisements to the Branch Council for Ireland, with the request that the Branch Council will inform the Executive Committee by whose authority the advertisement (β) has been issued."

(α)—MEDICAL REGISTRATION.

Important Notices.

1. Registered medical practitioners who, since registration, have changed their residence, should at once send due notice thereof to the Registrar of the General Medical Council, in order that their correct addresses may appear in the edition of the "Medical Register" for 1880 (now in the press and undergoing correction), otherwise by Section 14 of the Medical Act (1858) they are liable to have their names erased from the "Medical Register," and thus, by Sections 31 to 37 of the said Act, to lose the right to hold certain appointments, to sign valid certificates, or "to recover, in any court of law, charges for professional aid, advice, and visits, and the cost of any medicines or other medical or surgical appliances rendered or supplied by them to their patients."

2. Persons possessing registerable qualifications that are not already registered must, if they desire the same to appear in the "Medical Register" for 1880, register such qualifications on or before 1st January 1880, otherwise, by Section 27 of the Medical Act, they cannot be inserted in the forthcoming edition of the "Register."

3. Communications respecting registration, or the business of the General Medical Council, should be addressed to the Medical Council Office, 315, Oxford-street, London, W.

(signed) *W. J. C. Miller*, Registrar.

(β)—MEDICAL REGISTRATION.

Important Notices.

1. Registered medical practitioners (originally registered in the office of the Branch Medical Council, Ireland) who, since registration, have changed their residence, should at once send due notice thereof to the Registrar of the Branch Medical Council, Ireland, in order that their correct addresses may appear in the edition of the "Medical Register" for 1880 (now in the press and undergoing correction), otherwise, by Section 14 of the Medical Act (1858), such practitioners are liable to have their names erased from the "Medical Register," and thus, by Sections 31 to 37 of the said Act, to lose the right to hold certain appointments, to sign valid certificates, or "to recover in any court of law charges for professional aid, advice and visits, and the cost of any medicines or other medical or surgical appliances rendered or supplied by them to their patients."

2. Persons possessing registrable qualifications that are not already registered must, if they desire the same to appear in the "Medical Register" for 1880, register such qualifications on or before 1st January 1880, otherwise, by Section 27 of the Medical Act, they cannot be inserted in the forthcoming edition of the "Register."

3. Communications respecting registration, or changes of residence, should be addressed to the Branch Medical Council Office, 35, Dawson-street, Dublin, and attention is called to the fact that notices of change of residence by persons originally registered in Ireland, sent to the Registrar of the General Medical Council instead of the Registrar of the Branch Medical Council, Ireland, will not prevent erasure.

35, Dawson-street, Dublin,
23 October, 1879.

(signed) *W. E. Steele*, Registrar.

Resolution 3 :—"That the case of the removal from the Local Register for Ireland of the name of Charles Lewis (Mem. 1852, Lic. Midwif. 1862, R. Coll. Surg. Eng.; Lic. R. Coll. Phys. Edin. 1865; Lic. Soc. Apoth. Lond. 1868) be submitted to the Counsel to be consulted on the question of registration, in accordance with the foregoing Resolution 4, and that no further step be taken in the matter until their opinion is received."*

Resolution 4 :—"That the Registrar of the Branch Council for Ireland be informed that, inasmuch as the aforesaid Charles Lewis had duly communicated to the General Registrar his change of address, from Brentford, in Middlesex, to Hay, in Breconshire, his name has never been removed from the General Register."

(h.) CASE, and OPINION thereon by SOLICITOR GENERAL and Mr. VAUGHAN HAWKINS, in regard to MEDICAL REGISTRATION.

Counsel are requested to refer to the Medical Act (1858).

By that Act, Section 4, the General Medical Council is established, and also Branch Councils for England, Scotland, and Ireland.

By Section 10, the General Council is to appoint a Registrar, who is also to act as Registrar of the Branch Council for England.

By Section 11, the Branch Councils for Scotland and Ireland are also to appoint Registrars.

By Section 14, the Registrars are bound to keep their respective Registers correct, and the mode of doing so is pointed out.

The scheme of registration seems to be this :—

Each Branch Registrar is to keep a separate Register, and is to send a copy (Section 25) to the Registrar of the General Council.

From the combined entries in the Branch Registers, the Registrar of the General Council forms the "Medical Register," which, under Section 27, is to be printed, and the printed copies are to be evidence.

Difficulties having arisen in the working of this scheme as between the Registrar of the General Council and the Branch Registrars for Scotland and Ireland, the General Council took the opinion of Mr. Charles Bowen. Copy Case and Opinion is sent.

The Irish Branch Council, not acquiescing in this opinion, have taken the opinion of Mr. Holmes, the Solicitor General for Ireland. Copy of the Case and Opinion is sent.

It is very desirable to establish harmonious action in the working of the Act, and the General Medical Council therefore desires your opinion on the questions upon which the learned Counsel are at issue.

An actual case which has occurred may be stated as illustrating one difficulty which has arisen.

Mr. Lewis was registered by the Registrar of the Irish Branch, and his name, having been so registered, was transmitted to the Registrar of the General Medical Council, and was by him inserted in the "Medical Register." Mr. Lewis afterwards left Ireland and went to reside in Wales. He gave notice of his change of residence to the Registrar of the General Medical Council, but did not give notice to the Registrar of the Irish Branch Council.

The address was altered in the "Medical Register," but the old address remained on the Register of the Branch Council for Ireland, and the Registrar of that branch wrote a letter to Mr. Lewis to his old address (under Section 14), and receiving no answer, he struck Mr. Lewis's name off the Branch Register, and required the Registrar of the General Council to remove the name from the "Medical Register," which of course the latter cannot do.

The different sections of the Act are so fully stated in the Case and Opinions sent, that it is not considered necessary to dwell upon them at length.

The object of the General Medical Council is to frame rules (which they have power to make under Section 16) to carry out the spirit of the Act in such a manner as will ensure its harmonious working by the General Registrar and the Branch Registrars. The Council has framed certain formal rules, but they do not touch the points in issue.

Counsel are requested to consider the points raised in the cases submitted to Mr. Charles Bowen and Mr. Holmes, with their opinions thereon, and to advise the General Medical Council as to the mode in which the several Registers should be kept in accordance with the provisions of the Medical Act.

* The details of this case are as follows :—Mr. Charles Lewis having moved from Brentford, in Middlesex, to Hay, in Breconshire, duly notified such change of residence to the General Registrar, who, in accordance with instructions from the Executive Committee in regard to such cases (*see* paragraph 4 of foot-note, on page 347 of these Minutes), made the change of address in the "Medical Register" under his care. Subsequently, on 23rd October 1879, the Registrar of the Branch Council for Ireland wrote, directing the erasure of the name from the "Medical Register," "in accordance with his requisition," on the ground that the change of address had not been notified to him by Mr. Lewis. Mr. Lewis was originally registered in Ireland, in 1859, but subsequently removed to Folkestone, in Kent, and thereafter to Brentford, in Middlesex.

OPINION.

WE are of opinion that a registered practitioner, who desires to have a higher degree or additional qualification obtained by him inserted in the Register, must apply to the Registrar of one of the Branch Councils for that purpose; and that the provisions of Section 25 of the Medical Act as to registration apply to the entering in the Register of such higher degrees or additional qualifications.

But we are of opinion that such application, and the consequent entry in the Local Register, need not be made to or by the Registrar of the particular branch, in the Local Register of which the original qualification of the applicant was first entered, but may be made to and by any one of the Local Registrars. Thus a practitioner whose name was originally entered in the Irish Local Register may, in our opinion, apply to the Registrar for England for the purpose of having an additional or substituted qualification inserted in the Register, and such qualification may thereupon be entered in the Local Register for England, and be thence copied into the General Register; and conversely a person whose name was originally entered in the English Local Register may obtain the insertion of a subsequent qualification by application to the Irish Local Registrar.

Temple, 11 December 1879.

(signed) *Hardinge Giffard.*
F. Vaughan Hawkins.

Appendix, No. 4.

PAPERS put in by Mr. *Wheelhouse* (a Member of the Committee).

RETURN showing the Number of Persons that received DEGREES or DIPLOMAS from the several UNIVERSITIES in *Scotland*, the ROYAL COLLEGE of PHYSICIANS, EDINBURGH, the ROYAL COLLEGE of SURGEONS, EDINBURGH, and the FACULTY of PHYSICIANS and SURGEONS, GLASGOW, during the Years 1876, 1877, and 1878, respectively; showing, also, the Place or Places where such Persons were Professionally Educated respectively, and the Periods of Study at each.

UNIVERSITY OF EDINBURGH.

TABLE I.—NUMBER of M.B.'s for 1876, 1877, and 1878, with the Numbers of Years of Medical Study before Graduating.

YEAR.	YEARS OF STUDY.										TOTAL Candidates who received Degree.
	4 Years.	4½ Years.	5 Years.	5½ Years.	6 Years.	6½ Years.	7 Years.	7½ Years.	8½ Years.		
1876 - - -	21	28	25	8	1	2	0	0	0	85	
1877 - - -	19	34	21	15	13	1	1	0	1	105	
1878 - - -	27	37	28	15	4	4	2	0	0	117	

TABLE II.—NUMBER of M.B.'s for 1876, 1877, and 1878, showing the Place or Places where such Persons were Professionally Educated, and the Periods of Study at each.

Y E A R.	Number.	Where Educated, and Period of Study.	TOTAL Period of Study.
1876 - -	1	Glasgow - - - 2 years; Edinburgh, 3 years	5 years.
	2	- ditto - - - 3 " " 2½ "	5½ "
	3	- ditto - - - 1 " " 3 "	4 "
	4	Birmingham - - - 2 " " 3 "	5 "
	5	- ditto - - - 1 " " 3 "	†5 "
	6	Liverpool - - - 1 " " 4 "	5 "
	7	- ditto - - - 1 " " 2½ "	*4½ "
	8	St. Thomas's Hospital - 3 " " 2 "	5 "
	9	- - ditto - - - 3 " " 2½ "	5½ "
	10	Bristol - - - 2 " " 3 "	5 "
	11	University College - 1 " " 2½ "	*4½ "
	12	St. Bartholomew's - 1 " " 3 "	†5 "
1877 - -	1	Glasgow - - - 2 years; Edinburgh, 2 years	4 years.
	2	- ditto - - - 1 " " 3 "	4 "
	3	- ditto - - - ½ " " 4½ "	5 "

° Also one year at Liverpool Medical School.
† Also had one year at St. Bartholomew's Hospital.

Appendix, No. 4.

UNIVERSITY OF EDINBURGH.—TABLE II.—*continued.*

Y E A R.	Number.	Where Educated, and Period of Study.	TOTAL Period of Study.
1877 - -	4	Glasgow - - - 1 year; Edinburgh, 4 years	5 years.
	5	- ditto - - - 3½ " " 1 "	4½ "
	6	- ditto - - - 1 " " 4½ "	5½ "
	7	- ditto - - - 2 " " 3 "	5 "
	8	- ditto - - - 1½ " " 3 "	4½ "
	9	Cambridge - - - 1 " " 3 "	4 "
	10	King's College - - 4 " " 2 "	6 "
	11	- - ditto - - 2 " " 2 "	4 "
	12	St. Bartholomew's - 4 " " 3 "	7 "
	13	University College - 2 " " 4 "	*8½ "
	14	- - ditto - - 4 " " 2 "	6 "
	15	St. Thomas's Hospital - 3 " " 3 "	6 "
	16	Newcastle - - - 1 " " 3 "	4 "
	17	Norfolk and Norwich - 2½ " " 4 "	6½ "
	18	Bristol - - - 3 " " 3 "	6 "
	19	Sheffield - - - 1 " " 3 "	4 "
	20	McGill College, Canada 1 " " 3 "	4 "
	21	Dalhousie University - 5 " " 1½ "	6½ "
	22	- - ditto - - 3 " " 3 "	6 "
	23	Calcutta - - - 3 " " 2 "	5 "
	24	Madras - - - 1 " " 3½ "	4½ "
	25	Berlin - - - 1 " " 4 "	†6 "
1878 - -	1	Glasgow - - - 2½ years; Edinburgh, 2 years	4½ years.
	2	- ditto - - - 2 " " 3 "	5 "
	3	- ditto - - - 1 " " 4 "	5 "
	4	- ditto - - - 3½ " " 2 "	5½ "
	5	- ditto - - - 2 " " 3 "	5 "
	6	- ditto - - - 1 " " 5½ "	6½ "
	7	- ditto - - - 2 " " 4 "	6 "
	8	Guy's Hospital - - 3 " " 2½ "	5½ "
	9	- - ditto - - 2 " " 2½ "	4½ "
	10	- - ditto - - 2 " " 2 "	4 "
	11	Aberdeen - - - 1 " " 5 "	6 "
	12	- ditto - - - 1 " " 3 "	4 "
	13	Hants' Hospital - - 1 " " 4 "	5 "
	14	Newcastle - - - 1 " " 4 "	5 "
	15	Stoke Hospital - - 1 " " 4 "	5 "
	16	Leeds - - - 2 " " 3 "	5 "
	17	Durham - - - 2 " " 4 "	6 "
	18	Manchester - - - 2 " " 4 "	6 "
	19	University College - 2 " " 2 "	4 "
	20	King's College - - 2 " " 2 "	4 "
	21	Vienna - - - 1 " " 4½ "	5½ "

* Also two years and a half at Norfolk and Norwich.

† Also one year at Sydney.

UNIVERSITY OF EDINBURGH--continued.

Appendix, No. 4.

MEMORANDUM.

IN making the following Returns in Tables I. and II. it may be necessary to explain that from the hospital schools of London and extra-mural schools in Scotland, only two *anni medici* are received, and from the provincial schools in England, only one *annus medicus* is received as qualifying for degrees in this university. Apprenticeship with a medical practitioner is not received as qualifying for any part of the four years of medical study. A number of English students, some after serving apprenticeships and taking a full course at provincial and London hospital schools, repeat, some a part of the course, others, the whole course at this university.

As an apprenticeship does not qualify for any part of the period of study, candidates for degrees rarely enter it in their schedules. In like manner, students from the London and provincial schools generally only fill in such classes as they desire may qualify for the degree; and when they repeat those classes at the university, which they had previously taken elsewhere, and which would have qualified, if they had been in accordance with the requirements of this university, they often omit these extra-academical classes, and enter in their schedules those on the same subjects taken at the university. Other students spend, during their medical curriculum, one or more years as assistants, generally before appearing for their final examination.

The periods spent in apprenticeship, years of medical study at extra-academical schools when not qualifying for the degree, attendance at hospitals when no qualifying classes are taken, and assistantships, are generally not stated in the schedules given in by candidates, and are therefore, except in one or two cases, not embraced in the Returns now made. It will thus be seen that a considerable number of candidates may have years of medical study which they do not enter in the schedules given in by them. (See Tables I. and II.)

In the year 1876, out of 85 graduates, 75 took their whole medical course at										75
Edinburgh	-	-	-	-	-	-	-	-	=	1
1 Graduate took 2 years in Glasgow	-	-	-	3	years in Edinburgh	-	-	-	=	5
1 " " 3 " "	-	-	-	2½	" "	-	-	-	=	5½
1 " " 1 " "	-	-	-	3	" "	-	-	-	=	4
1 " " 2 " Bristol	-	-	-	3	" "	-	-	-	=	5
1 " " 2 " Birmingham	-	-	-	3	" "	-	-	-	=	5
*1 " " 1 " "	-	-	-	3	" "	-	-	-	=	5
†1 " " 1 " University College	-	-	-	2½	" "	-	-	-	=	4½
1 " " 3 " St. Thomas's Hospital,	-	-	-	2½	" "	-	-	-	=	5½
1 " " 3 " Liverpool M. S. -	-	-	-	4	" "	-	-	-	=	5
1 " " 3 " St. Thomas's Hospital,	-	-	-	2	" "	-	-	-	=	5
TOTAL Number of Graduates in 1876 - - -										85

Three graduates being partly educated at Glasgow; two at Birmingham; two at Liverpool; two at St. Thomas's Hospital; one at University College; one at St. Bartholomew's Hospital; and one at Bristol.

In the year 1877, out of 105 graduates, 79 took their whole medical course at										79
Edinburgh	-	-	-	-	-	-	-	-	=	1
1 Graduate took 2 years in Glasgow	-	-	-	-	2 years in Edinburgh	-	-	-	=	4
1 " " 1 " "	-	-	-	-	3 " "	-	-	-	=	4
1 " " ½ " "	-	-	-	-	4½ " "	-	-	-	=	5
1 " " 1 " "	-	-	-	-	4 " "	-	-	-	=	5
1 " " 3½ " "	-	-	-	-	1 " "	-	-	-	=	4½
1 " " 1 " "	-	-	-	-	4½ " "	-	-	-	=	5½
1 " " 2 " "	-	-	-	-	3 " "	-	-	-	=	5
1 " " 1½ " "	-	-	-	-	3 " "	-	-	-	=	4½
1 " " 1 " Cambridge	-	-	-	-	3 " "	-	-	-	=	4
1 " " 4 " King's College	-	-	-	-	2 " "	-	-	-	=	6
1 " " 2 " "	-	-	-	-	2 " "	-	-	-	=	4
1 " " 4 " St. Bartholomew's Hospital,	-	-	-	-	3 " "	-	-	-	=	7
†1 " " 2 " University College	-	-	-	-	4 " "	-	-	-	=	8½
1 " " 4 " "	-	-	-	-	2 " "	-	-	-	=	6
1 " " 3 " St. Thomas's Hospital	-	-	-	-	3 " "	-	-	-	=	6
1 " " 1 " Newcastle	-	-	-	-	3 " "	-	-	-	=	4
1 " " 2½ " Norfolk and Norwich Hospital,	-	-	-	-	4 " "	-	-	-	=	6½
1 " " 3 " Bristol	-	-	-	-	3 " "	-	-	-	=	6
1 " " 1 " Sheffield	-	-	-	-	3 " "	-	-	-	=	4

* Also one year at St. Bartholomew's Hospital.

† Also one year at Liverpool School of Medicine.

‡ Also two and a half years at the Norfolk and Norwich Hospital.

Appendix, No. 4.

UNIVERSITY OF EDINBURGH—*continued.*

2	Graduates took 1 year in McGill College, Canada	-	3 years in Edinburgh	= 4	2
1	" " 5 " Dalhousie University	-	1½ " "	= 6½	1
1	" " 3 " " "	-	3 " "	= 6	1
1	" " 3 " Calcutta	-	2 " "	= 5	1
1	" " 1 " Madras	-	3½ " "	= 4½	1
*1	" " 1 " Berlin	-	4 " "	= 6	1
TOTAL Number of Graduates in 1877					105

Eight graduates being partly educated at Glasgow; two at King's College; one at St. Bartholomew's Hospital; one at Cambridge; two at University College; one at St. Thomas's Hospital; one at Newcastle; one at Norfolk and Norwich Hospital; one at Bristol; one at Sheffield; one at McGill College, Canada; two at Dalhousie University, Canada; one at the University of Calcutta; one at the University of Madras; one at Berlin, and at Sydney University.

In the year 1878, out of 117 graduates, 96 took their whole medical course at Edinburgh - - - = 96

1	Graduate took 2½ years in Glasgow	-	2 years in Edinburgh	= 4½	1
1	" " 2 " "	-	3 " "	= 5	1
1	" " 1 " "	-	4 " "	= 5	1
1	" " 3½ " "	-	2 " "	= 5½	1
1	" " 2 " "	-	3 " "	= 5	1
1	" " 1 " "	-	5½ " "	= 6½	1
1	" " 2 " "	-	4 " "	= 6	1
1	" " 3 " Guy's Hospital	-	2½ " "	= 5½	1
1	" " 2 " "	-	2½ " "	= 4½	1
1	" " 2 " "	-	2 " "	= 4	1
1	" " 1 " Aberdeen	-	5 " "	= 6	1
1	" " 1 " "	-	3 " "	= 4	1
1	" " 1 " Hants Hospital	-	4 " "	= 5	1
1	" " 1 " Newcastle	-	4 " "	= 5	1
1	" " 1 " Stoke Hospital	-	4 " "	= 5	1
1	" " 2 " Leeds	-	3 " "	= 5	1
1	" " 2 " Durham University	-	4 " "	= 6	1
1	" " 2 " Manchester	-	4 " "	= 6	1
1	" " 2 " University College	-	2 " "	= 4	1
1	" " 2 " King's College	-	2 " "	= 4	1
1	" " 1 " Vienna	-	4½ " "	= 5½	1
TOTAL Number of Graduates in 1878					117

Seven graduates being partly educated at Glasgow; three at Guy's Hospital; two at Aberdeen; one at Newcastle; one at Hants County Hospital; one at Stoke Hospital; one at Leeds; one at Durham University; one at Manchester; one at University College; one at King's College; and one at Vienna.

* Also one year at Sydney.

UNIVERSITY OF ABERDEEN.

RETURN showing the Number of PERSONS that have received DEGREES or DIPLOMAS (MEDICAL) from the UNIVERSITY of ABERDEEN ; showing also the Place or Places where such Persons were Professionally Educated respectively, and the Periods of Study at each.

Year.	Number.	Where Educated.	Period of Study.	Year.	Number.	Where Educated.	Period of Study.
1876	1 to 28	Aberdeen University	4 Anni Medici.	1877	1 to 26	Aberdeen University	4 Anni Medici.
	29 to 35	Aberdeen University	5 "		27	{Aberdeen University St. Bartholomew's Hospital.	3 " 3 "
	36	{Aberdeen University Edinburgh University	3 " 1 "		28, 29	{Aberdeen University St. Bartholomew's Hospital.	2 " 3 "
	37	{Aberdeen University Edinburgh University	4 " 1 "		30	{Aberdeen University St. Bartholomew's Hospital.	2 " 4 "
	38	{Aberdeen University Edinburgh University	1 " 4 "		31, 32, 33	{Aberdeen University Guy's Hospital	2 " 4 "
	39	{Aberdeen University Glasgow University	1 " 3 "		34	{Aberdeen University Guy's Hospital	2 " 3 "
	40	{Aberdeen University Charing Cross Hos- pital.	3 " 1 "		35, 36	{Aberdeen University St. Thomas's Hospital	2 " 3 "
	41	{Aberdeen University St. George's Hospital	2 " 3 "		37	{Aberdeen University London Hospital	2 " 3 "
	42	{Aberdeen University University College Hospital.	2 " 3 "		38	{Aberdeen University Calcutta University	2 " 2 "
	43 to 46	{Aberdeen University London Hospital	2 " 4 "		39	{Aberdeen University Dublin University	1 " 3 "
	47	{Aberdeen University London Hospital	2 " 5 "		40	{Aberdeen University Bristol	2 " 3 "
	48	{Aberdeen University St. Thomas's Hospi- tal.	2 " 2 "		41	{Aberdeen University University College Hospital.	2 " 3 "
	49	{Aberdeen University Middlesex Hospital	3 " 1 "		TOTAL 41	Graduates, M.B.	
	50	{Aberdeen University Hull Liverpool	2 " 1 " 2 "	1878	1 to 24	Aberdeen University	4 Anni Medici.
	51 to 52	{Aberdeen University Guy's Hospital	2 " 4 "		25	{Aberdeen University Edinburgh University	2 " 2 "
	53	{Aberdeen University Guy's Hospital	2 " 3 "		26	{Aberdeen University Calcutta University	2 " 4 "
	54	{Aberdeen University King's College Hos- pital.	2 " 4 "		27	{Aberdeen University Calcutta University	2 " 3 "
	55 to 56	{Aberdeen University King's College Hos- pital	2 " 3 "		28, 29	{Aberdeen University King's College Hos- pital.	2 " 3 "
	57	{Aberdeen University King's College Hos- pital.	3 " 1 "		30	{Aberdeen University Middlesex Hospital	2 " 2 "
	58	{Aberdeen University St. Bartholomew's Hospital.	2 " 4 "		31	{Aberdeen University Guy's Hospital	2 " 5 "
	59 to 62	{Aberdeen University St. Bartholomew's Hospital.	2 " 4 "		32	{Aberdeen University St. Bartholomew's Hospital.	2 " 2 "
	TOTAL 62	Graduates, M.B.			33	{Aberdeen University Madras	1 " 5 "
					34	{Aberdeen University Madras	1 " 3 "
					TOTAL 34	Candidates, M.B.	

UNIVERSITY OF GLASGOW.

RETURN showing the Number of PERSONS that have received DEGREES or DIPLOMAS from the UNIVERSITY of GLASGOW during the Years 1876, 1877, and 1878 respectively ; showing also the Place or Places where such Persons were Professionally Educated respectively, and the Periods of Study at each.

Year.	Number.	Where Educated.	Period of Study.	Year.	Number.	Where Educated.	Period of Study.
1876	39	Glasgow University - -	4 years.	1877	1	Glasgow University - -	1 year.
	13	- - ditto - -	5 "		1	Edinburgh University - -	2 "
	1	- - ditto - -	2 "		1	Calcutta University - -	2 "
	1	Aberdeen University - -	2 "		1	Glasgow University - -	1 "
	1	Glasgow University - -	1 "		1	Melbourne University - -	4 "
	1	Melbourne University - -	3 "		1	Glasgow University - -	2 "
	1	Glasgow University - -	3 "		1	London Hospital Schools - -	2 "
	1	Anderson's College - -	3 "		62	TOTAL.	
	1	Glasgow University - -	1 "				
	1	Calcutta University - -	3 "				
	56	TOTAL.		1878	44	Glasgow University - -	4 years.
					8	- ditto - -	5 "
					2	- ditto - -	3 "
					2	Edinburgh University - -	1 "
1877	38	Glasgow University - -	4 years.		1	Glasgow University - -	2 "
	14	- - ditto - -	5 "		1	Edinburgh University - -	2 "
	2	- - ditto - -	3 "		1	Glasgow University - -	3 "
	2	Edinburgh University - -	1 "		1	Anderson's College - -	2 "
	1	Glasgow University - -	3 "		1	Glasgow University - -	4 "
	1	Edinburgh University - -	3 "		1	Glasgow Royal Infirmary School.	1 "
	1	Glasgow University - -	3 "		1	Glasgow University - -	1 "
	1	Glasgow Royal Infirmary School.	1 "		1	Melbourne University - -	3 "
	2	Glasgow University - -	1 "		1	Glasgow University - -	4 "
	2	Melbourne University - -	3 "		1	Edinburgh University - -	2 "
	1	Glasgow University - -	1 "		59	TOTAL.	
	1	Calcutta University - -	4 "				

Glasgow University, }
13 August 1879. }

Thomas Moir,
Assistant Clerk of Senate.

FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW.

RETURN showing the Number of PERSONS who have received DIPLOMAS from the FACULTY of PHYSICIANS and SURGEONS of GLASGOW during the Years 1876, 1877, and 1878, and showing the Place or Places where such Persons were Professionally Educated.

Number.	Where Educated.	Number.	Where Educated.	Number.	Where Educated.
61	Glasgow.	1	Birmingham, Manchester, and Glasgow.	1	Sheffield.
8	Edinburgh and Glasgow.			2	Leeds.
5	London and Glasgow.	1	Melbourne, London, and Glasgow.	1	Newcastle-on-Tyne.
1	Dublin and Glasgow.			1	Dublin and Sheffield.
2	Birmingham and Glasgow.	3	Edinburgh.	4	Dublin.
1	Harvard (Boston) and Glasgow.	1	New York and Edinburgh.	8	Belfast.
		1	London and Edinburgh.	1	Cork.
2	Manchester and Glasgow.	1	Dublin, Cork, and Edinburgh.	2	Galway.
1	Leeds and Glasgow.			1	Dublin and Cork.
1	Liverpool and Glasgow.	1	Bombay, London, and Edinburgh.	1	Galway and Dublin.
1	Cincinnati (U. S.) and Glasgow.			1	Galway and Belfast.
		1	Aberdeen.	1	Dublin, Belfast, Cork.
1	Bombay and Glasgow.	1	Heidelberg and Aberdeen.	1	Marseilles and Paris.
1	Louvain and Glasgow.	1	Bristol and Aberdeen.	1	Paris.
4	Calcutta and Glasgow.	11	London.	1	Berlin.
2	London, Edinburgh, and Glasgow.	1	Manchester.	1	Calcutta.
		5	Birmingham.	4	Bombay.

S U M M A R Y.

TOTAL NUMBER of LICENTIATES for the Three Years embraced in Return	-	-	-	152
Educated wholly in Glasgow	-	-	-	61
Educated in part in Glasgow	-	-	-	32
Educated in whole or in part at other schools in Scotland	-	-	-	10
Educated wholly in London	-	-	-	11
Educated in English provincial schools	-	-	-	11
Educated in Irish schools	-	-	-	19
Educated in Continental schools	-	-	-	3
Educated in Indian Schools	-	-	-	5
TOTAL, as above	-	-	-	152

UNIVERSITY OF ST. ANDREWS.

RETURN showing the Number of M.B. and C.M. DEGREES conferred by the UNIVERSITY of ST. ANDREWS in the Years 1876-77, 1877-78, and 1878-79.

YEARS.	Number.	Where Educated.	Period of Study.
1876-77 -	1	University of Edinburgh -	4 years.
1877-78 -	1	University of Edinburgh -	4 years.
1878-79 -	2	{ University of Edinburgh -	4 years.
		{ Queen's College, Belfast -	4 years.

ROYAL COLLEGE OF SURGEONS OF EDINBURGH.

RETURN showing the Number of PERSONS who have received DEGREES or DIPLOMAS from the ROYAL COLLEGE of SURGEONS, EDINBURGH, during the Years 1876, 1877, and 1878 respectively ; showing also the Place or Places where such Persons were Professionally Educated respectively, and the Periods of Study at each.

Year.	No.	Where Educated.	Period of Study.	Year.	No.	Where Educated.	Period of Study.
1876	1	Edinburgh	5½ years.	1876	51	Edinburgh	6 years.
	2	Dublin	4 "		52	Edinburgh	5½ "
	3	Glasgow	4 "		53	Belfast	5½ "
	4	Belfast	4 "		54	Cork	5 "
	5	Cork	4 "		55	Glasgow	4 "
	6	Galway	2 "		56	Leeds	3½ "
		Belfast	2 "			Edinburgh	1½ "
		Cork	2 "		57	London	4 "
	7	Dublin	1 "		58	Edinburgh	5½ "
		Galway	1 "		59	Aberdeen	3½ "
	8	Liverpool	4 "			Edinburgh	2½ "
	9	Leeds	4½ "		60	Belfast	5 "
	10	Edinburgh	6½ "		61	Belfast	5 "
	11	London	6½ "		62	Dublin	4½ "
	12	Glasgow	4 "		63	Edinburgh	4½ "
	13	London	5 "			Glasgow	1 "
	14	London	4 "		64	Edinburgh	5 "
	15	Glasgow	5½ "		65	Birmingham	4½ "
	16	Glasgow	3 "		66	Edinburgh	5½ "
		Edinburgh	3½ "		67	Glasgow	5½ "
	17	Birmingham	4½ "		68	Edinburgh	6 "
	18	Edinburgh	5 "		69	Edinburgh	5½ "
	19	London	4½ "		70	Glasgow	3½ "
	20	Glasgow	5½ "			Sheffield	1½ "
	21	Leeds	6½ "		71	Glasgow	3½ "
	22	Dublin	5 "			Liverpool	1 "
	23	Edinburgh	5 "		72	New York	3 "
	24	—	—		73	Leeds	4 "
	25	Edinburgh	6 years.			Edinburgh	3 months.
	26	Dublin	5 "		74	London	5 years.
	27	Edinburgh	5½ "		75	Edinburgh	4½ "
		Mauritius	3 months.		76	London	5 "
	28	Glasgow	4½ years.		77	Edinburgh	5 "
		Edinburgh	½ "		78	Cork	4 "
	29	Edinburgh	5½ "		79	Edinburgh	5½ "
	30	Edinburgh	4½ "		80	Toronto	4 "
		Calcutta	3 "		81	London	4 "
	31	London	15 months.		82	Liverpool	5 "
		Edinburgh	6 "		83	Edinburgh	1 "
	32	Belfast	4 years.			Belfast	4½ "
	33	Edinburgh	4½ "		84	Edinburgh	6½ "
		Cork	1 "		85	Edinburgh	5 "
	34	Galway	1 "		86	Dublin	4 "
		Dublin	2 "		87	Cork	4½ "
	35	Belfast	5 "		88	Leeds	4 "
	36	Melbourne	5 "		89	Dublin	5 "
		Edinburgh	2½ "			Edinburgh	5 "
	37	Cork	2 "		90	Glasgow	3 months.
		Dublin	½ "			Melbourne	1 year.
	38	Edinburgh	6 "		91	Cork	4 "
	39	Edinburgh	6 "			Edinburgh	3 months.
	40	Belfast	5½ "		92	Dublin	4 years.
	41	Edinburgh	6 "		93	Edinburgh	3 "
	42	Edinburgh	6 "			Dublin	1 "
	43	Edinburgh	6 "		94	Manchester	4 "
	44	Birmingham	5½ "		95	Aberdeen	3½ "
		Dublin	3 "			Edinburgh	1½ "
	45	Cork	1 "		96	Glasgow	5½ "
	46	Dublin	5 "		97	—	—
	47	Dublin	5 "		98	Edinburgh	6 years.
	48	London	4 "		99	Edinburgh	6 "
	49	Edinburgh	4½ "			London	4 "
	50	Belfast	4 "		100	Edinburgh	1 "
						Glasgow	3 months.

ROYAL COLLEGE OF SURGEONS OF EDINBURGH—*continued.*

Year.	No.	Where Educated.	Period of Study.	Year.	No.	Where Educated.	Period of Study.
1876	101	Edinburgh - - -	6½ years.	1877	156	—	—
	102	Edinburgh - - -	1 "		157	Glasgow - - -	4 years.
		Glasgow - - -	4½ "			Glasgow - - -	3 "
	103	Cork - - -	2 "		158	Edinburgh - - -	1 "
		Dublin - - -	2½ "		159	Glasgow - - -	4½ "
	104	Edinburgh - - -	6 "		160	Glasgow - - -	5½ "
	105	Belfast - - -	4 "		161	—	—
	106	Birmingham - - -	5 "		162	Edinburgh - - -	4½ years.
		Birmingham - - -	1½ "		163	Edinburgh - - -	6½ "
	107	Leeds - - -	2½ "		164	Edinburgh - - -	6 "
		Sheffield - - -	1½ "		165	Belfast - - -	5 "
	108	Birmingham - - -	4 "		166	Montreal - - -	4 "
	109	Manchester - - -	4 "		167	Edinburgh - - -	5 "
		Cork - - -	2 "		168	Dublin - - -	4 "
	110	Dublin - - -	2½ "		169	Cork - - -	4½ "
		Belfast - - -	4 "		170	Manchester - - -	5½ "
	111	Dublin - - -	1 "		171	London - - -	4 "
	112	Leeds - - -	4 "			Edinburgh - - -	1 "
	113	Toronto - - -	4 "		172	Edinburgh - - -	5½ "
	114	Toronto - - -	4 "		173	Glasgow - - -	3 "
	115	Dublin - - -	4 "			Edinburgh - - -	1 "
	116	Birmingham - - -	7 "		174	Glasgow - - -	4 "
		Glasgow - - -	6 "		175	Glasgow - - -	4 "
	117	Newcastle - - -	6 months.		176	Belfast - - -	4 "
	118	Belfast - - -	5 years.		177	London - - -	4 "
	119	Melbourne - - -	4 "		178	Cork - - -	4 "
	120	London - - -	4½ "		179	Galway - - -	4 "
	121	Cork - - -	4 "			Edinburgh - - -	1 "
	122	Dublin - - -	4 "		180	London - - -	4 "
	123	Edinburgh - - -	4 "			Dublin - - -	3 months.
		Glasgow - - -	2½ "		181	Melbourne - - -	5 years.
	124	Edinburgh - - -	½ "		182	Edinburgh - - -	4 "
		Newcastle - - -	1 "		183	Glasgow - - -	4 "
	125	Cork - - -	4 "		184	Newcastle - - -	4 "
	126	Cork - - -	4 "		185	Dublin - - -	4 "
	127	Manchester - - -	4 "		186	Galway - - -	6 months.
	128	Sheffield - - -	4 "			Belfast - - -	4 years.
	129	Edinburgh - - -	5 "			Galway - - -	4 "
	130	Edinburgh - - -	6½ "		187	Cork - - -	6 months.
	131	Birmingham - - -	4 "			Dublin - - -	1 year.
	132	Cork - - -	5 "			Edinburgh - - -	3 months.
1877	133	Dublin - - -	5 "		188	Bristol - - -	4 years.
	134	Toronto - - -	4 "		189	Edinburgh - - -	5 "
	135	Edinburgh - - -	6½ "			Galway - - -	1 "
	136	Montreal - - -	4 "		190	Belfast - - -	3 "
	137	—	—			Dublin - - -	½ "
	138	Nantes - - -	2 years.		191	Edinburgh - - -	4 "
		Paris - - -	4 "		192	Glasgow - - -	6 months.
		Glasgow - - -	3½ "			Aberdeen - - -	4 years.
	139	Sheffield - - -	1½ "		193	London - - -	4 "
		Birmingham - - -	2 "		194	Leeds - - -	3 "
	140	Edinburgh - - -	3 "			Edinburgh - - -	1 "
	141	Glasgow - - -	5 "		195	Cork - - -	4 "
	142	Liverpool - - -	4 "		196	Edinburgh - - -	4 "
		Edinburgh - - -	1 "		197	Cork - - -	4 "
	143	Edinburgh - - -	5 "		198	Edinburgh - - -	5 "
	144	Cork - - -	4½ "		199	Dublin - - -	1½ "
	145	Dublin - - -	5 "			Cork - - -	2½ "
	146	Aberdeen - - -	1½ "		200	Edinburgh - - -	4 "
		Edinburgh - - -	3 "		201	Cork - - -	4 "
	147	Liverpool - - -	6 "		202	Edinburgh - - -	4 "
	148	Dublin - - -	4 "		203	Cork - - -	4½ "
	149	Cork - - -	5 "		204	Edinburgh - - -	5 "
		Belfast - - -	1½ "		205	Cork - - -	2½ "
	150	Dublin - - -	3½ "			Dublin - - -	1¼ "
	151	Galway - - -	4 "		206	Cork - - -	4½ "
	152	Edinburgh - - -	4 "		207	Edinburgh - - -	5 "
	153	Manchester - - -	4½ "		208	Madras - - -	5 "
	154	—	—			Edinburgh - - -	1 "
	155	Birmingham - - -	5½ years.		209	Bombay - - -	4 "

ROYAL COLLEGE OF SURGEONS OF EDINBURGH—continued.

Year.	No.	Where Educated.	Period of Study.	Year.	No.	Where Educated.	Period of Study.
1877	210	Bombay - - - -	4 years.	1877	265	Edinburgh - - - -	5 years.
	211	Bombay - - - -	4 "		266	—	—
	212	—	—		267	London - - - -	5 years.
	213	Bombay - - - -	5 years.		268	Leeds - - - -	4 "
	214	Glasgow - - - -	4 "		269	London - - - -	3 "
	215	—	—			Sheffield - - - -	1 "
	216	Edinburgh - - - -	4 years.		270	Edinburgh - - - -	2½ "
		Glasgow - - - -	1 "			Aberdeen - - - -	3½ "
	217	Mauritius - - - -	3 "		271	Belfast - - - -	5 "
		Edinburgh - - - -	5 "		272	Dublin - - - -	4 "
	218	Edinburgh - - - -	4 "			Toronto - - - -	2 "
	219	Dublin - - - -	4½ "		273	Montreal - - - -	2 "
	220	Edinburgh - - - -	4 "			Detroit - - - -	1 "
	221	Dublin - - - -	4 "			Edinburgh - - - -	3 months.
	222	Edinburgh - - - -	4 "			Galway - - - -	1 year.
	223	—	—		274	Belfast - - - -	1½ "
	224	London - - - -	4 years.			Edinburgh - - - -	1½ "
	225	Cincinnati - - - -	4 "		275	Glasgow - - - -	1 "
		Edinburgh - - - -	1 "			Newcastle - - - -	3 "
	226	Glasgow - - - -	4 "		276	Belfast - - - -	4 "
		Dublin - - - -	3 "		277	—	—
	227	Edinburgh - - - -	1½ "		278	Edinburgh - - - -	2 years.
	228	London - - - -	4 "			Aberdeen - - - -	2½ "
	229	Toronto - - - -	2 "		279	Cork - - - -	4 "
		Edinburgh - - - -	5 "		280	Dublin - - - -	4 "
	230	Edinburgh - - - -	4 "		281	Glasgow - - - -	5 "
		Glasgow - - - -	6 months.		282	Glasgow - - - -	3 "
	231	Aberdeen - - - -	6 "			Galway - - - -	1½ "
		Edinburgh - - - -	3 years.		283	Edinburgh - - - -	5½ "
	232	Edinburgh - - - -	4 "		284	Edinburgh - - - -	4 "
	233	Edinburgh - - - -	5 "		285	Edinburgh - - - -	5 "
	234	Glasgow - - - -	4 "		286	Edinburgh - - - -	6 "
	235	Liverpool - - - -	4 "		287	London - - - -	1½ "
	236	Edinburgh - - - -	4 "			Glasgow - - - -	2½ "
	237	Edinburgh - - - -	4 "		288	London - - - -	3 "
	238	London - - - -	4 "			Edinburgh - - - -	1 "
	239	Belfast - - - -	4 "		289	—	—
	240	Edinburgh - - - -	4 "		290	Birmingham - - - -	4 years.
	241	—	—	1878	291	Bombay - - - -	4½ "
	242	Edinburgh - - - -	4 years.		292	Dublin - - - -	4 "
	243	Leeds - - - -	3 "		293	Edinburgh - - - -	8 "
		Bradford - - - -	2 "			Aberdeen - - - -	1 "
	244	Glasgow - - - -	4 "		294	Dublin - - - -	4 "
	245	Cork - - - -	5 "		295	Galway - - - -	2 "
		London - - - -	1½ "			Dublin - - - -	3 "
	246	Leicester - - - -	1 "		296	Aberdeen - - - -	4½ "
		Cambridge - - - -	2 "		297	Edinburgh - - - -	4 "
		Edinburgh - - - -	6 months.		298	Montreal - - - -	4 "
	247	Edinburgh - - - -	4½ years.		299	Edinburgh - - - -	4½ "
	248	Edinburgh - - - -	3 months.		300	Glasgow - - - -	5 "
		Gottengen - - - -	5 years.		301	—	—
	249	—	—		302	Belfast - - - -	2 years.
	250	—	—			Dublin - - - -	3½ "
	251	Edinburgh - - - -	4½ years.		303	Leeds - - - -	4 "
	252	Edinburgh - - - -	3 months.		304	Liverpool - - - -	5 "
		Belfast - - - -	4 years.		305	Edinburgh - - - -	6½ "
	253	Leeds - - - -	4 "		306	Edinburgh - - - -	6½ "
	254	Glasgow - - - -	3½ "		307	London - - - -	5 "
		Edinburgh - - - -	1 "		308	Edinburgh - - - -	1 "
	255	London - - - -	4½ "			London - - - -	4 "
	256	Edinburgh - - - -	4½ "		309	Edinburgh - - - -	5 "
	257	Edinburgh - - - -	4 "			Galway - - - -	2 "
	258	Aberdeen - - - -	4 "		310	Belfast - - - -	2 "
	259	Manchester - - - -	4 "			Dublin - - - -	1 "
	260	Edinburgh - - - -	5 "		311	London - - - -	4 "
		London - - - -	5 "		312	Newcastle - - - -	4 "
	261	Edinburgh - - - -	3 months.		313	Dublin - - - -	4 "
	262	London - - - -	4 years.		314	Cork - - - -	4½ "
		Edinburgh - - - -	2½ "		315	Dublin - - - -	1½ "
	263	Belfast - - - -	6 months.			Edinburgh - - - -	3½ "
		Galway - - - -	2 years.		316	London - - - -	4 "
	264	Glasgow - - - -	2 "		317	—	—
		Edinburgh - - - -	3 "		318	Edinburgh - - - -	6 years.

ROYAL COLLEGE OF SURGEONS OF EDINBURGH—continued.

Year.	No.	Where Educated.	Period of Study.	Year.	No.	Where Educated.	Period of Study.
1878	319	Edinburgh - - - -	5 years.	1878	376	Edinburgh - - - -	6 years.
	320	London - - - -	2 "		377	Manchester - - - -	4 "
	321	Edinburgh - - - -	5½ "		378	Edinburgh - - - -	5 "
	322	Liverpool - - - -	6½ "		379	Edinburgh - - - -	5 "
		Galway - - - -	1 year.		380	Cork - - - -	2 "
	323	Cork - - - -	1 "			Dublin - - - -	2 "
		Dublin - - - -	2 "		381	Edinburgh - - - -	5 "
	324	Edinburgh - - - -	5 "		382	Edinburgh - - - -	7 "
	325	London - - - -	4½ "		383	Galway - - - -	4 "
	326	Montreal - - - -	4½ "			Edinburgh - - - -	3 months.
		Glasgow - - - -	2½ "			Glasgow - - - -	3 years.
	327	Edinburgh - - - -	2½ "		384	Edinburgh - - - -	1½ "
		Michigan - - - -	3 "			London - - - -	1 "
	328	New York - - - -	2 "		385	Paris - - - -	3 "
		Edinburgh - - - -	1 "			Pennsylvania - - - -	1 "
	329	Toronto - - - -	4½ "		386	Dublin - - - -	4 "
	330	Glasgow - - - -	4 "		387	Edinburgh - - - -	5½ years.
	331	Cork - - - -	4 "		388	Edinburgh - - - -	5½ years.
	332	Glasgow - - - -	4 years.		389	Aberdeen - - - -	3½ years.
	333	Cork - - - -	4 "		390	Edinburgh - - - -	1 "
	334	Edinburgh - - - -	5½ "		391	Edinburgh - - - -	5½ "
	335	Birmingham - - - -	4½ "			Liverpool - - - -	2½ "
	336	Edinburgh - - - -	4½ "		392	Edinburgh - - - -	2 "
	337	Edinburgh - - - -	4½ "			London - - - -	1½ "
	338	Belfast - - - -	4 years.		393	Bombay - - - -	5 "
	339	Glasgow - - - -	3½ "		394	Bombay - - - -	4½ "
	340	Sheffield - - - -	5½ "		395	London - - - -	1 "
	341	Edinburgh - - - -	5 "			Glasgow - - - -	4 "
	342	Montreal - - - -	4 "		396	Edinburgh - - - -	4½ "
	343	Cork - - - -	4 "		397	Belfast - - - -	1½ "
	344	Edinburgh - - - -	5 "			Glasgow - - - -	3 "
	345	Edinburgh - - - -	5 "		398	Edinburgh - - - -	6½ "
	346	Edinburgh - - - -	7 "			London - - - -	2½ "
	347	Cork - - - -	5 "		399	Edinburgh - - - -	3 "
	348	Edinburgh - - - -	6 "			Glasgow - - - -	3½ "
	349	Cork - - - -	4 "		400	Edinburgh - - - -	1 "
	350	Edinburgh - - - -	6 "			Calcutta - - - -	3 "
	351	Belfast - - - -	3 "		401	London - - - -	1½ "
		Edinburgh - - - -	1 "		402	London - - - -	4½ "
	352	Edinburgh - - - -	5 "			London - - - -	3 "
	353	Dublin - - - -	4 "		403	Norwich (Hos.) - - - -	{ 6 months. (1 year.)
	354	Edinburgh - - - -	4½ "			Edinburgh - - - -	½ year.
	355	Edinburgh - - - -	5 "		404	Cambridge - - - -	2 years.
	356	Aberdeen - - - -	4½ "			Edinburgh - - - -	3 "
	357	London - - - -	4 "		405	Cork - - - -	1 "
	358	London - - - -	4½ "			Belfast - - - -	3½ "
	359	Harvard - - - -	3 years (Annus Medicus, nine months.)		406	Calcutta - - - -	4 "
	360	Edinburgh - - - -	6½ years.			Aberdeen - - - -	1 "
	361	Manchester - - - -	4 "		407	Edinburgh - - - -	4½ years.
	362	Belfast - - - -	7 "		408	Galway - - - -	2 "
	363	Cork - - - -	4 "		409	Dublin - - - -	2 "
		Leeds - - - -	1½ "		410	London - - - -	1 "
	364	Cork - - - -	3 years.			Edinburgh - - - -	4½ "
	365	Dublin - - - -	1½ "		411	Glasgow - - - -	4½ "
	366	Glasgow - - - -	5½ years.		412	Glasgow - - - -	4½ "
		Belfast - - - -	1 "		413	Edinburgh - - - -	7½ "
	368	Galway - - - -	2½ "		414	Dublin - - - -	4 "
		Glasgow - - - -	1 "		415	Edinburgh - - - -	5½ "
	369	Glasgow - - - -	5½ "		416	Edinburgh - - - -	4½ "
	370	Melbourne - - - -	5 years.		417	London - - - -	4 "
	371	Edinburgh - - - -	6 "		418	London - - - -	5 "
	372	Galway - - - -	2½ "		419	Glasgow - - - -	5 "
		Glasgow - - - -	2½ "		420	Edinburgh - - - -	5 "
	374	Glasgow - - - -	4 "		421	Galway - - - -	5 "
	375	Edinburgh - - - -	4½ "		422	Edinburgh - - - -	3 months.
					423	Manchester - - - -	4 years.
					424	Glasgow - - - -	6 "

ROYAL COLLEGE OF SURGEONS OF EDINBURGH—continued.

Year.	No.	Where Educated.	Period of Study.	Year.	No.	Where Educated.	Period of Study.
1878	425	Toronto - - - -	4 years.	1878	454	Edinburgh - - - -	5 years.
	426	Edinburgh - - - -	5½ "		455	—	—
	427	Edinburgh - - - -	4½ "		556	Edinburgh - - - -	5½ years.
	428	London - - - -	4 "		457	Glasgow - - - -	5 "
	429	—	—		458	Toronto - - - -	3 "
	430	{ Edinburgh - - - -	1 year.		459	Cork - - - -	5 "
		{ Newcastle - - - -	4 "		460	Edinburgh - - - -	7½ "
						{ Cork - - - -	1 "
	431	{ Cambridge - - - -	2½ "		461	{ London - - - -	2 "
		{ Edinburgh - - - -	1½ "			{ Dublin - - - -	2 "
		{ London - - - -	1½ "		462	Liverpool - - - -	4½ "
	432	Edinburgh - - - -	5½ "		463	{ London - - - -	3 "
	433	Edinburgh - - - -	5 "			{ Glasgow - - - -	1½ "
	434	{ Toronto - - - -	1½ "		464	Glasgow - - - -	4 "
		{ Montreal - - - -	2½ "		465	Birmingham - - - -	4 "
					466	{ Dublin - - - -	4 "
	435	{ Montreal - - - -	3½ "			{ Edinburgh - - - -	1 "
		{ Edinburgh - - - -	½ "				
		{ Cork - - - -	3 "			{ Belfast - - - -	4 "
	436	{ Edinburgh - - - -	1 "		467	{ Galway - - - -	1 "
		{ Dublin - - - -	1 "			{ Dublin - - - -	1 "
						{ Edinburgh - - - -	3 months.
		{ Montreal - - - -	3 "		468	—	—
	437	{ Harvard - - - -	1 "		469	London - - - -	4 years.
		{ Edinburgh - - - -	3 months.		470	{ Galway - - - -	2½ "
	438	Leeds - - - -	4 years.			{ Belfast - - - -	1½ "
	439	Glasgow - - - -	4½ "		471	Montreal - - - -	4 "
	440	{ Dublin - - - -	1 "		472	Dublin - - - -	4 "
		{ Galway - - - -	3½ "		473	Dublin - - - -	4½ "
	441	Dublin - - - -	4½ "		474	{ Galway - - - -	1 "
	442	{ Edinburgh - - - -	4½ "			{ Belfast - - - -	4 "
		{ Glasgow - - - -	1 "		475	Edinburgh - - - -	5 "
					476	Cork - - - -	4 "
	443	{ Edinburgh - - - -	4½ "		477	Manchester - - - -	4 "
		{ London - - - -	½ "		478	Manchester - - - -	5 "
		{ Newcastle - - - -	½ "		479	Belfast - - - -	5 "
					480	{ Belfast - - - -	4½ "
	444	{ Glasgow - - - -	3½ "			{ Edinburgh - - - -	½ "
		{ Edinburgh - - - -	2½ "		481	Edinburgh - - - -	5½ "
	445	—	—		482	London - - - -	3 "
	446	{ Glasgow - - - -	3½ years.			{ Aberdeen - - - -	1 "
		{ Manchester - - - -	½ "		483	Edinburgh - - - -	4½ "
	447	Edinburgh - - - -	8 "		484	Belfast - - - -	5 "
	448	London - - - -	4 "		485	London - - - -	4½ "
		{ London - - - -	4 "		486	London - - - -	4 "
	449	{ Philadelphia - - - -	1 "		487	Toronto - - - -	4 "
		{ Leicester - - - -	6 months.		488	{ Birmingham - - - -	4 "
	450	Edinburgh - - - -	5½ years.			{ Edinburgh - - - -	1 "
	451	Dublin - - - -	6 "		489	—	—
		{ Dublin - - - -	1 "		490	Dublin - - - -	5½ years.
	452	{ Edinburgh - - - -	½ "		491	{ Calcutta - - - -	3 "
		{ Germany - - - -	2½ "			{ London - - - -	2 "
	453	{ Belfast - - - -	3½ "		492	Glasgow - - - -	5½ "
		{ Cork - - - -	1 "				

Note.—From accidental circumstances a few of the Schedules are wanting, and it has therefore been found impossible to make the Return quite complete.

Edinburgh, }
30 July 1879. }

Joseph Bell,
Hon. Secretary, Royal College of Surgeons.

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH.

Appendix, No. 4.

RETURN showing the Number of PERSONS who have received DEGREES or DIPLOMAS from the ROYAL COLLEGE of PHYSICIANS, EDINBURGH, in terms of their Double Qualification Arrangements with the ROYAL COLLEGE of SURGEONS, EDINBURGH, during the Years 1876, 1877, and 1878 respectively; showing also the Place or Places where such Persons were Professionally Educated respectively, and the Periods of Study at each.

No.	Where Educated.	Period of Study.	No.	Where Educated.	Period of Study.
1	Cork - - - -	4 years.	51	Cork - - - -	4½ years.
2 {	Galway - - - -	2 "	52	Leeds - - - -	4 "
	Belfast - - - -	2 "	53	Dublin - - - -	5 "
3 {	Cork - - - -	2 "	54 {	Edinburgh - - - -	5 "
	Dublin - - - -	1 "		Glasgow - - - -	3 months.
	Galway - - - -	1 "		Melbourne - - - -	1 year.
4	Liverpool - - - -	4 "	55 {	Cork - - - -	4 years.
5	Leeds - - - -	4½ "		Edinburgh - - - -	3 months.
6	Edinburgh - - - -	6½ "	56	Dublin - - - -	4 years.
7	Glasgow - - - -	5½ "	57 {	Cork - - - -	2 "
8	Leeds - - - -	6½ "		Dublin - - - -	2½ "
9	Dublin - - - -	5 "	58	Edinburgh - - - -	6 "
10	Edinburgh - - - -	5 "	59	Belfast - - - -	4 "
11	—	—	60	Birmingham - - - -	5 "
12	Edinburgh - - - -	6 years.		Birmingham - - - -	1½ "
13	Dublin - - - -	5 "	61 {	Leeds - - - -	2½ "
14 {	Edinburgh - - - -	5½ "		Sheffield - - - -	1½ "
	Mauritius - - - -	3 months.	62	Birmingham - - - -	4 "
15 {	Glasgow - - - -	4½ years.	63	Manchester - - - -	4 "
	Edinburgh - - - -	½ "	64 {	Cork - - - -	2 "
16	Edinburgh - - - -	5½ "		Dublin - - - -	2½ "
17	Edinburgh - - - -	4½ "	65 {	Belfast - - - -	4 "
18	Edinburgh - - - -	6 "		Dublin - - - -	1 "
19	Belfast - - - -	5½ "	66	Leeds - - - -	4 "
20	Edinburgh - - - -	6 "	67	Toronto - - - -	4 "
21	Edinburgh - - - -	6 "	68	Toronto - - - -	4 "
22	Edinburgh - - - -	6 "	69	Dublin - - - -	4 "
23	Birmingham - - - -	5½ "	70	Birmingham - - - -	7 "
24 {	Dublin - - - -	3 "	71 {	Glasgow - - - -	6 "
	Cork - - - -	1 "		Newcastle - - - -	6 months.
25	Dublin - - - -	5 "	72	Belfast - - - -	5 years.
26	Dublin - - - -	5 "	73	Melbourne - - - -	4 "
27	London - - - -	4 "	74	London - - - -	4½ "
28	Edinburgh - - - -	4½ "	75	Cork - - - -	4 "
29	Belfast - - - -	4 "	76	Dublin - - - -	4 "
30	Edinburgh - - - -	6 "	77	Edinburgh - - - -	4 "
31	Edinburgh - - - -	5½ "		Glasgow - - - -	2½ "
32	Belfast - - - -	5½ "	78 {	Edinburgh - - - -	½ "
33	Cork - - - -	5 "		Newcastle - - - -	1 "
34	Glasgow - - - -	4 "	79	Cork - - - -	4 "
35 {	Leeds - - - -	3½ "	80	Cork - - - -	4 "
	Edinburgh - - - -	1½ "	81	Manchester - - - -	4 "
36	London - - - -	4 "	82	Sheffield - - - -	4 "
37 {	Leeds - - - -	4 "	83	Edinburgh - - - -	5 "
	Edinburgh - - - -	3 months.	84	Edinburgh - - - -	6½ "
38	London - - - -	5 years.	85	Birmingham - - - -	4 "
39	Edinburgh - - - -	4½ "	86	Liverpool - - - -	6 "
40	London - - - -	5 "	87	Dublin - - - -	4 "
41	Edinburgh - - - -	5 "	88	Cork - - - -	5 "
42	Cork - - - -	4 "	89 {	Belfast - - - -	1½ "
43	Edinburgh - - - -	5½ "		Dublin - - - -	3½ "
44	Toronto - - - -	4 "	90	Galway - - - -	4 "
45	London - - - -	4 "	91	Edinburgh - - - -	4 "
46	Liverpool - - - -	5 "	92	Manchester - - - -	4½ "
47 {	Edinburgh - - - -	1 "	93	—	—
	Belfast - - - -	4½ "	94	Birmingham - - - -	5½ years.
48	Edinburgh - - - -	6½ "	95	—	—
49	Edinburgh - - - -	5 "	96	Edinburgh - - - -	4½ years.
50	Dublin - - - -	4 "	97	Edinburgh - - - -	6½ "

Appendix, No. 4.

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH—*continued.*

No.	Where Educated.	Period of Study.	No.	Where Educated.	Period of Study.
98	Edinburgh - - -	6 years.	148	Leeds - - -	3 years.
99	Belfast - - -	5 "	149	Bradford - - -	2 "
100	Montreal - - -	4 "	150	Glasgow - - -	4 "
101	Edinburgh - - -	5 "	151	Cork - - -	5 "
102	Dublin - - -	4 "	151	London - - -	1½ "
103	Cork - - -	4½ "	151	Leicester - - -	1 "
104	Manchester - - -	5½ "	151	Cambridge - - -	2 "
105	London - - -	4 "	151	Edinburgh - - -	6 months.
105	Edinburgh - - -	1 "	152	Edinburgh - - -	4½ years.
106	Edinburgh - - -	5½ "	153	Edinburgh - - -	3 months.
107	Glasgow - - -	3 "	153	Gottengen - - -	5 years.
107	Edinburgh - - -	1 "	154	—	—
108	Glasgow - - -	4 "	155	—	—
109	Glasgow - - -	4 "	156	Edinburgh - - -	4½ years.
110	Belfast - - -	4 "	157	Edinburgh - - -	3 months.
111	Galway - - -	6 months.	157	Belfast - - -	4 years.
111	Belfast - - -	4 years.	158	Leeds - - -	4 "
112	Galway - - -	4 "	159	London - - -	5 "
112	Cork - - -	6 months	159	Edinburgh - - -	3 months.
112	Dublin - - -	1 year.	160	London - - -	4 years.
112	Edinburgh - - -	3 months.	161	Edinburgh - - -	2½ "
113	Bristol - - -	4 years.	161	Belfast - - -	6 months.
114	Edinburgh - - -	5 "	161	Galway - - -	2 years.
115	Galway - - -	1 "	162	Glasgow - - -	2 "
115	Belfast - - -	3 "	162	Edinburgh - - -	3 "
115	Dublin - - -	½ "	163	Edinburgh - - -	5 "
116	Edinburgh - - -	4 "	164	—	—
117	Glasgow - - -	6 months.	165	London - - -	5 years.
117	Aberdeen - - -	4 years.	166	Leeds - - -	4 "
118	London - - -	4 "	167	London - - -	3 "
119	Leeds - - -	3 "	167	Sheffield - - -	1 "
119	Edinburgh - - -	1 "	168	Edinburgh - - -	2½ "
120	Cork - - -	4 "	168	Aberdeen - - -	3½ "
121	Edinburgh - - -	4 "	169	Belfast - - -	5 "
122	Cork - - -	4 "	170	Dublin - - -	4 "
123	Edinburgh - - -	5 "	171	Toronto - - -	2 "
124	Dublin - - -	1½ "	171	Montreal - - -	2 "
124	Cork - - -	2½ "	171	Detroit - - -	1 "
125	Edinburgh - - -	4 "	171	Edinburgh - - -	3 months.
126	Cork - - -	4 "	172	Galway - - -	1 year.
127	Edinburgh - - -	4 "	172	Belfast - - -	1½ "
128	Cork - - -	4½ "	172	Edinburgh - - -	1½ "
129	Edinburgh - - -	5 "	173	Glasgow - - -	1 "
130	Cork - - -	2½ "	173	Newcastle - - -	3 "
130	Dublin - - -	1½ "	174	Belfast - - -	4 "
131	Cork - - -	4½ "	175	—	—
132	Edinburgh - - -	5 "	176	Edinburgh - - -	2 years.
133	Glasgow - - -	4 "	176	Aberdeen - - -	2½ "
134	—	—	177	Cork - - -	4 "
135	Edinburgh - - -	4 years.	178	Dublin - - -	4 "
135	Glasgow - - -	1 "	179	Glasgow - - -	5 "
136	Mauritius - - -	3 "	180	Glasgow - - -	3 "
136	Edinburgh - - -	5 "	180	Galway - - -	1½ "
137	Edinburgh - - -	4 "	181	Edinburgh - - -	5½ "
138	Dublin - - -	4½ "	182	Edinburgh - - -	4 "
139	Edinburgh - - -	4 "	183	Edinburgh - - -	5 "
140	Dublin - - -	4 "	184	Edinburgh - - -	6 "
141	Edinburgh - - -	4 "	185	London - - -	1½ "
142	—	—	185	Glasgow - - -	2½ "
143	London - - -	4 years.	186	London - - -	3 "
144	Belfast - - -	4 "	186	Edinburgh - - -	1 "
145	Edinburgh - - -	4 "			
146	—	—			
147	Edinburgh - - -	4 years.			

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH—*continued.*

No.	Where Educated.	Period of Study.	No.	Where Educated.	Period of Study.
187	—	—	239	Cork - - -	4 years.
188	Glasgow - - -	5 years.	240	Leeds - - -	1½ "
189	—	—	241	Cork - - -	3 years.
190	Belfast - - -	2 years.	242	Dublin - - -	1½ "
191	Dublin - - -	3½ "	243	—	—
192	Leeds - - -	4 "	244	Glasgow - - -	5½ years.
193	Liverpool - - -	5 "	245	Belfast - - -	1 "
194	Edinburgh - - -	6½ "	246	Galway - - -	2½ "
195	Edinburgh - - -	6½ "	247	Glasgow - - -	1 "
196	London - - -	5 "	248	Glasgow - - -	5½ "
197	Edinburgh - - -	1 "	249	Melbourne - - -	5 years.
198	Edinburgh - - -	4 "	250	Edinburgh - - -	6 "
199	Edinburgh - - -	5 "	251	Galway - - -	2½ "
200	Galway - - -	2 "	252	Glasgow - - -	2½ "
201	Belfast - - -	2 "	253	—	—
202	Dublin - - -	1 "	254	Glasgow - - -	4 "
203	London - - -	4 "	255	Edinburgh - - -	4½ "
204	Newcastle - - -	4 "	256	Edinburgh - - -	5 "
205	Dublin - - -	4 "	257	Edinburgh - - -	5 "
206	Cork - - -	4½ "	258	Edinburgh - - -	7 "
207	Dublin - - -	1½ "	259	Galway - - -	4 "
208	Edinburgh - - -	3½ "	260	Edinburgh - - -	3 months.
209	London - - -	4 "	261	Glasgow - - -	3 years.
210	Edinburgh - - -	6 years.	262	Edinburgh - - -	1½ "
211	Edinburgh - - -	5 "	263	London - - -	1 "
212	London - - -	2 "	264	Paris - - -	3 "
213	Edinburgh - - -	5½ "	265	Pennsylvania - - -	1 "
214	Liverpool - - -	6½ "	266	Dublin - - -	4 "
215	Galway - - -	1 "	267	Edinburgh - - -	5½ years.
216	Cork - - -	1 "	268	Aberdeen - - -	3½ years.
217	Dublin - - -	2 "	269	Edinburgh - - -	1 "
218	Montreal - - -	4½ "	270	London - - -	1 "
219	Glasgow - - -	2½ "	271	Glasgow - - -	4 "
220	Edinburgh - - -	2½ "	272	Edinburgh - - -	4½ "
221	Michigan - - -	3 "	273	Belfast - - -	1½ "
222	New York - - -	2 "	274	Glasgow - - -	3 "
223	Edinburgh - - -	1 "	275	Edinburgh - - -	6½ "
224	Toronto - - -	4½ "	276	London - - -	2½ "
225	Glasgow - - -	4 "	277	Edinburgh - - -	3 "
226	Cork - - -	4 "	278	Cambridge - - -	2 "
227	Edinburgh - - -	4 years.	279	Edinburgh - - -	3 "
228	Cork - - -	4 "	280	—	—
229	Edinburgh - - -	5½ "			
230	Birmingham - - -	4½ "			
231	Edinburgh - - -	4½ "			
232	—	—			
233	Belfast - - -	4 years.			
234	Glasgow - - -	3½ "			
235	Sheffield - - -	½ "			
236	Edinburgh - - -	5 "			
237	Montreal - - -	4 "			
238	Cork - - -	4 "			
239	Edinburgh - - -	5 "			
240	Edinburgh - - -	5 "			
241	Aberdeen - - -	4½ "			
242	London - - -	4 "			
243	London - - -	4½ "			
244	Harvard - - -	3 years.			
245	Edinburgh - - -	6½ "			
246	Manchester - - -	4 "			
247	Belfast - - -	7 "			

(Amicus Medicus
9 months).

Appendix, No. 4.

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH—*continued.*

No.	Where Educated.	Period of Study.	No.	Where Educated.	Period of Study.
281	Edinburgh - - -	7½ years.	313	Glasgow - - -	3½ years.
282	Dublin - - -	4 "		Manchester - - -	½ "
283	Edinburgh - - -	5½ "	314	Edinburgh - - -	8 "
284	Edinburgh - - -	4½ "	315	London - - -	4 "
285	London - - -	4 "	316	Toronto - - -	3 "
286	London - - -	5 "	317	Cork - - -	5 "
287	Glasgow - - -	5 "	318	Edinburgh - - -	7½ "
288	Edinburgh - - -	5 "			
289	Galway - - -	5 "	319	Cork - - -	1 "
	Edinburgh - - -	3 monthls.		London - - -	2 "
290	Manchester - - -	4 years.		Dublin - - -	2 "
291	Glasgow - - -	6 "	320	Liverpool - - -	4½ "
292	Toronto - - -	4 "	321	London - - -	3 "
293	Edinburgh - - -	5½ "		Glasgow - - -	1½ "
294	Edinburgh - - -	4½ "	322	Glasgow - - -	4 "
295	London - - -	4 "	323	Birmingham - - -	4 "
296	—	—			
297	Edinburgh - - -	1 year.	324	Dublin - - -	4 "
	Newcastle - - -	4 "		Edinburgh - - -	1 "
298	Cambridge - - -	2½ "		Belfast - - -	4 "
	Edinburgh - - -	1½ "	325	Galway - - -	1 "
	London - - -	1½ "		Dublin - - -	1 "
299	Edinburgh - - -	5½ "		Edinburgh - - -	3 months.
300	Edinburgh - - -	5 "	326	—	—
301	Toronto - - -	1½ "	327	London - - -	4 years.
	Montreal - - -	2½ "	328	Galway - - -	2½ "
302	Montreal - - -	3½ "		Belfast - - -	1½ "
	Edinburgh - - -	½ "	329	Montreal - - -	4 "
303	Cork - - -	3 "	330	Dublin - - -	4 "
	Edinburgh - - -	1 "	331	Dublin - - -	4½ "
	Dublin - - -	1 "	332	Galway - - -	1 "
304	Montreal - - -	3 "		Belfast - - -	4 "
	Harvard - - -	1 "	333	Edinburgh - - -	5 "
	Edinburgh - - -	3 months.	334	Cork - - -	4 "
305	Leeds - - -	4 years.	335	Manchester - - -	4 "
306	Glasgow - - -	4½ "	336	Manchester - - -	5 "
307	Dublin - - -	1 "	337	Belfast - - -	5 "
	Galway - - -	3 "	338	Belfast - - -	4½ "
308	Dublin - - -	4½ "		Edinburgh - - -	½ "
309	Edinburgh - - -	4½ "	339	Edinburgh - - -	5½ "
	Glasgow - - -	1 "	340	London - - -	3 "
310	Edinburgh - - -	4½ "		Aberdeen - - -	1 "
	London - - -	½ "	341	Edinburgh - - -	4½ "
	Newcastle - - -	½ "	342	Belfast - - -	5 "
311	Glasgow - - -	3½ "	343	London - - -	4½ "
	Edinburgh - - -	2½ "	344	London - - -	4 "
312	—	—	345	Toronto - - -	4 "
			346	Birmingham - - -	4 "
				Edinburgh - - -	1 "

Note.—From accidental circumstances a few of the Schedules are wanting, and it has therefore been found impossible to make the Return quite complete.

FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW.

RETURN showing the Number of PERSONS that have received the LICENSE of the FACULTY of PHYSICIANS and SURGEONS of GLASGOW during the Years 1876, 1877, and 1878 respectively; showing also the Place or Places where such Persons were Professionally Educated respectively, and the Period of Study in each.

Year.	No.	Where Educated.	Period of Study.	Year.	No.	Where Educated.	Period of Study.
1876	23	Glasgow - - - -	4 years.	1877	1	Calcutta - - - -	2½ years.
	2	Glasgow - - - -	5 "		1	Glasgow - - - -	2 "
	1	Edinburgh - - - -	3 "		2	London - - - -	4 "
	1	Glasgow - - - -	1½ "		1	Belfast - - - -	4 "
	2	Glasgow - - - -	3 "		1	Birmingham - - - -	4 "
	1	Edinburgh - - - -	1 "		1	Harvard (Boston, United States)	3 "
	1	London - - - -	1 "		1	Glasgow - - - -	1 "
	1	Glasgow - - - -	3 "		1	Sheffield - - - -	4 "
	1	London - - - -	2 "		1	London - - - -	2 "
	1	Glasgow - - - -	2 "		1	Edinburgh - - - -	2 "
	1	London - - - -	1 "		2	Birmingham - - - -	2 "
	1	Edinburgh - - - -	2 "		2	Glasgow - - - -	2 "
	1	Glasgow - - - -	1 "		1	Bristol - - - -	1 "
	1	Dublin - - - -	1 "		1	Aberdeen - - - -	3 "
	1	Glasgow - - - -	3 "		1	Cork - - - -	1 "
	1	Liverpool - - - -	2 "		1	Belfast - - - -	1 "
	1	Glasgow - - - -	2 "		1	Dublin - - - -	2 "
	1	Louvain - - - -	4 "		1	Cork - - - -	4 "
	1	Glasgow - - - -	1 "				
	1	Cincinnati - - - -	3 "	1878	20	Glasgow - - - -	4 "
	1	Glasgow - - - -	1 "		1	Glasgow - - - -	6 "
	1	Leeds - - - -	2 "		1	Edinburgh - - - -	2 "
	1	Glasgow - - - -	2 "		1	Glasgow - - - -	2 "
	1	New York - - - -	2 "		2	Edinburgh - - - -	1 "
	1	Edinburgh - - - -	2 "		2	Glasgow - - - -	3 "
	1	Edinburgh - - - -	4½ "		1	Edinburgh - - - -	4 "
	1	London - - - -	1 "		2	Calcutta - - - -	3 "
	1	Heidelberg - - - -	3 "		2	Glasgow - - - -	1 "
	4	London - - - -	4 "		1	Manchester - - - -	1 "
	1	Birmingham - - - -	1 "		1	Glasgow - - - -	3 "
	1	Manchester - - - -	1 "		1	Manchester - - - -	2 "
	1	Glasgow - - - -	2 "		1	Glasgow - - - -	2 "
	5	Belfast - - - -	4 "		5	London - - - -	4 "
	3	Dublin - - - -	4 "		2	Belfast - - - -	4 "
	1	Belfast - - - -	2 "		4	Birmingham - - - -	4 "
	1	Galway - - - -	2 "		1	Marseilles - - - -	4 "
	1	Dublin - - - -	3 "		1	Paris - - - -	1 "
	1	Cork - - - -	1 "		1	Berlin - - - -	5 "
	1	Newcastle - - - -	4 "		1	Aberdeen - - - -	4 "
	2	Galway - - - -	4 "		1	Leeds - - - -	4 "
	1	Galway - - - -	2 "		1	Cork - - - -	1 "
	1	Dublin - - - -	2 "		1	Dublin - - - -	2 "
	1	Leeds - - - -	4 "		1	Edinburgh - - - -	2 "
	1	Calcutta - - - -	4 "		1	London - - - -	1 "
	1	Glasgow - - - -	½ "		1	Edinburgh - - - -	1 "
	1	Calcutta - - - -	4 "		1	Glasgow - - - -	2 "
	1	Paris - - - -	5 "		1	Bombay - - - -	3 "
	1	Manchester - - - -	4 "		1	London - - - -	1½ "
					1	Edinburgh - - - -	1½ "
1877	13	Glasgow - - - -	4 "		1	Dublin - - - -	4 "
	2	Glasgow - - - -	5 "		1	Melbourne - - - -	4 "
	2	Edinburgh - - - -	3½ "		1	London - - - -	1 "
	2	Glasgow - - - -	½ "		1	Glasgow - - - -	½ "
	1	London - - - -	3 "		1	Sheffield - - - -	2 "
	1	Glasgow - - - -	1 "		1	Dublin - - - -	2 "
	2	London - - - -	2 "		1	Bombay - - - -	4 "
	2	Glasgow - - - -	2 "		1	Glasgow - - - -	1 "
	1	Edinburgh - - - -	4 "		4	Bombay - - - -	4 "

Appendix, No. 4.

FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW—*continued*.

SUMMARY for the Three Years.

Educated wholly in Glasgow	-	-	-	-	-	61
" partly in Glasgow	-	-	-	-	-	32
" wholly or partly in other Schools in Scotland	-	-	-	-	-	10
" in London	-	-	-	-	-	11
" English Provincial Schools	-	-	-	-	-	11
" Irish Schools	-	-	-	-	-	19
" Foreign Schools	-	-	-	-	-	8
TOTAL						152

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH, AND THE FACULTY OF
PHYSICIANS AND SURGEONS OF GLASGOW.

RETURN showing the Number of PERSONS that have received the DIPLOMAS of the DOUBLE QUALIFICATION granted conjointly by the ROYAL COLLEGE of PHYSICIANS of EDINBURGH and the FACULTY of PHYSICIANS and SURGEONS of GLASGOW during the Years 1876, 1877, and 1878 respectively; showing also the Place or Places where such Persons were Professionally Educated respectively, and the Period of Study in each.

Year.	No.	Where Educated.	Period of Study.	Year.	No.	Where Educated.	Period of Study.
1876	6	Glasgow	4 years.	1877	1	Calcutta	2 years.
	2	Glasgow	5 "		1	Glasgow	2½ "
	1	Edinburgh	3 "		1	London	4 "
	1	Glasgow	1½ "		1	Sheffield	4 "
	1	London	1 "		1	Belfast	4 "
	1	Glasgow	3 "		13	TOTAL.	
	1	Liverpool	2 "				
	1	Glasgow	2 "				
	1	Louvain	4 "				
	1	Glasgow	1 "	1878	4	Glasgow	4 years.
	1	Edinburgh	4½ "		1	Edinburgh	2 "
	1	New York	2 "		1	Glasgow	2 "
	1	Edinburgh	2 "		1	Manchester	1 "
	1	Leeds	4 "		1	Glasgow	3 "
	1	Newcastle	4 "		2	Calcutta	2 "
	2	Belfast	4 "		1	Glasgow	3 "
	1	Belfast	3½ "		1	Bombay	3 "
	1	Assistantship	1½ "		1	Glasgow	1½ "
	1	Leeds	2 "		1	Bombay	1 "
	1	Glasgow	2 "		1	London	1½ "
	2	Calcutta	4 "		1	Edinburgh	1½ "
	22	TOTAL.			1	Edinburgh	4 "
					1	Aberdeen	4 "
					2	London	4 "
					1	Melbourne	4 "
					1	London	1 "
					2	Belfast	4 "
					4	Bombay	4½ "
					21	TOTAL.	
1877	6	Glasgow	4 years.				
	1	Glasgow	5 "				
	1	Edinburgh	3½ "				
	2	Glasgow	½ "				

I N D E X

TO THE

R E P O R T

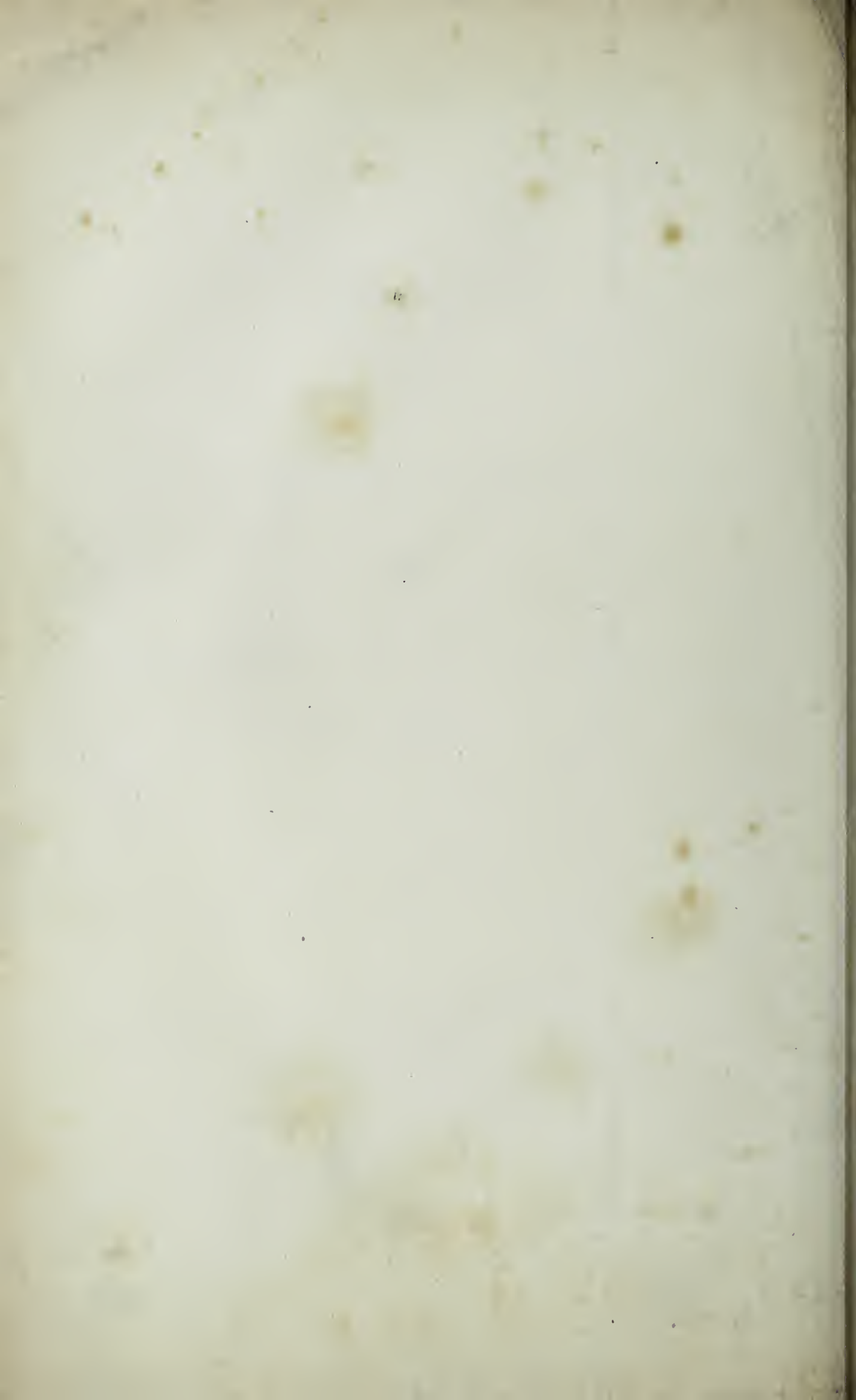
FROM THE

SELECT COMMITTEE

ON THE

MEDICAL ACT (1858) AMENDMENT
(No. 3) BILL [LORDS].

*Ordered, by The House of Commons, to be Printed,
29 July 1879.*



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Approval of the final examination under the conjoint scheme including clinical examination, as well as systematic medicine and surgery, *Quain* 1368, 1369—Expediency, in the event of a conjoint board, of the candidates undergoing clinical examination with the object of testing their knowledge of practice, *Turner* 3155-3158—Stimulus given by the Medical Council to the reform of clinical examinations, *Haughton* 3675—The system of clinical examination has now become universal in Scotland, *Wood* 4019.

College of Physicians of Edinburgh. See *Edinburgh, &c.*

College of Physicians (London). Power of the College of Physicians to license in surgery as well as in medicine, *Acland* 327—Action of the Local Government Board in accepting licentiates of the College of Physicians, as qualified both in medicine and surgery; explanation of the claims of the college on the latter point, *Simon* 1037-1043—Fellowship of the College of Physicians given by election by the members of the college, and not as the result of examination, *ib.* 1044, 1045—Close character of the election for the fellowship of the college, *Hart* 3836.

Constituency by which the representative of the college at the Medical Council is elected, *App.* 340.

Per-centage of rejections at first professional examinations in 1867 and 1877 respectively, *App.* 347.

Answers received from the London College of Physicians in 1877 upon questions proposed by the Executive Committee of the Medical Council in regard to the results of professional examinations, and the question of deficiencies in preliminary education, *App.* 366, 367.

Communication from the College of Physicians to the Medical Council, dated 22nd February 1878, with further reference to the subject of preliminary education and examination, *App.* 394.

Communication in 1879, in reply to certain memorials from ophthalmic surgeons and the Obstetrical Society, *App.* 409.

College of Surgeons of Edinburgh. See *Edinburgh College of Surgeons.*

COLLEGE OF SURGEONS (ENGLAND):

1. *Explanations in connection with the Examinations of the College, and the Course of Study.*
2. *Non-examination in Midwifery, Chemistry, &c.*
3. *Communications from the College on the Subject of Preliminary Education, &c.*
4. *Action of the College in the Matter of Medical Education, and in the Adoption of Improvements suggested by the Medical Council.*
5. *Election of a Representative at the Medical Council.*
6. *Number of Members, and of Fellows of the College.*
7. *Museum.*
8. *Fees.*

1. *Explanations in connection with the Examinations of the College, and the Course of Study:*

Opinion that the Medical Council has no power, even with the approval of the Privy Council, to require the College of Surgeons to examine a man in medicine before granting a license to practice medicine; full power of representing to the Privy Council, *Acland* 319-327.

Statement that the College of Surgeons has not for many years admitted any person to membership on an examination solely surgical, *Simon* 889-891.

Information relative to the examination of the College, witness submitting that the standard is quite high enough on the several subjects in which they examine, *Sir J. Paget* 2278-2299—Difficulty in raising the examinations of the College unless the schools are prepared to teach up to the increased standard, *ib.* 2288. 2294-2296—Necessity of a preliminary examination in general education before any one can be registered as a medical student of the College; the standard of this examination has been slightly raised, *ib.* 2289, 2290. 2294-2296—Requirement of four years' study between the preliminary and final examinations, *ib.* 2290.

Complaints made on the part of the public that the primary examination is too severe; exceptional instances of young men who cannot pass, *Sir J. Paget* 2297-2299—Instances of young men being advised by their private tutors to go up for easier examinations than those of the College of Surgeons, *ib.* 2304-2314—Numerous bodies from whom a certificate of preliminary examination is received by the College of Surgeons, *ib.* 2317—Necessity of the primary examination being passed at the College, *ib.* 2318. 2321.

License received by the College from the Society of Apothecaries, or from the College of Physicians, in place of an examination in medicine, *Sir J. Paget* 2319—Total of 509 pass examinations in the year 1878-79, the number of rejected candidates having been 164, *ib.* 2322-2325—Difficulty in obtaining sufficient dead bodies for examination; advantage rather of an examination upon the living body with blunt instruments, *ib.* 2323. 2619-2621.

Large expenditure by the College of Surgeons in examinations in the interests of the profession and of the public; moderate remuneration of the examiners, *Sir J. Paget* 2391-2394—Details as to the length and character of the examinations at the College; reference hereon to certain recommendations by the Medical Council, *ib.* 2497-2500. 2519-2523—Necessary study for four years, before the age of twenty-one, in the case of students of the College of Surgeons, *ib.* 2524.

Statement as to members of the Council of the College of Surgeons in England being only present occasionally at the examinations; different practice of the College of Surgeons in Ireland, *Sir J. Paget* 2592-2597—Exceptional course of the College of Surgeons of England in not accepting the primary examination of any other College, *ib.* 2598, 2599—Character of the examinations in the College, as compared with those of the Irish College of Surgeons, *ib.* 2598-2621.

Practice at the examination of the College of Surgeons to pass candidates who do not answer well in medicine, but who do well in other subjects; similar practice at the College of Physicians in regard to surgical qualification, *Hart* 3810, 3811—Opinion that the pass examination in medicine is not such an examination as any qualifying body should admit as a medical examination, *ib.* 3811.

Per-centage of rejections at first professional examinations, in 1867 and 1877 respectively, *App.* 347.

2. *Non-examination in Midwifery, Chemistry, &c.:*

Desire of the College for an examination in midwifery; postponement of this matter pending other improvements, *Simon* 892, 893.

Explanation as to the College not now examining in midwifery; second qualification obtained from the College of Physicians or the Society of Apothecaries, *Sir J. Paget* 2278-2287. 2368-2370—Nor does the College examine in chemistry or in materia medica

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medica, *Sir J. Paget* 2278—Desire of the College that its members should be examined in midwifery, &c.; this object being one of the reasons for urging the formation of a conjoint system, *ib.* 2284.

Explanation with further reference to the non-requirement of any examination in midwifery at the College of Surgeons though a course of study in midwifery is required, *Sir J. Paget* 2428-2430. 2735, 2736—Statement as to the College not having an examination in chemistry, materia medica, midwifery, or forensic medicine, *ib.* 2513-2516—Obstacle to students passing the College examination without some knowledge of chemistry, *ib.* 2525-2527.

3. *Communications from the College on the Subject of Preliminary Education, &c.:*

Answer received from the College of Surgeons in 1877 upon questions proposed by the Executive Committee of the Medical Council in regard to the results of the professional examinations and the question of deficiencies in preliminary education, *App.* 367, 368.

Communication from the College of Surgeons to the Medical Council, dated 26th March 1878, with further reference to the subject of preliminary education and examination, *App.* 395.

Communication in 1879 in reply to certain memorials from ophthalmic surgeons and the Obstetrical Society, *App.* 405, 406.

4. *Action of the College in the Matter of Medical Education and in the Adoption of Improvements suggested by the Medical Council:*

Constant efforts of the College of Surgeons to improve medical education wherever there is room for it, *Sir J. Paget* 2350—Suspended action of the College as regards various improvements pending the question of the adoption of a conjoint scheme, *ib.* 2402, 2403—Adoption by the College of several recommendations of the Medical Council, *ib.* 2404, 2405.

Assertion that the College of Surgeons has from the first refused to comply with the recommendations of the Council that medical education should last for four years and should commence at a medical school; similar refusal of other corporations, based on the fact that the College of Surgeons was not called upon to carry out this recommendation, *Hart* 3780-3782—Opposition shown by the College of Surgeons to the recommendations of the Medical Council; instances cited in support of this opposition, *ib.* 3848, 3849. 3943-3949.

Explanation of the reasons which caused a certain difference between the Medical Council and the College of Surgeons alluded to by a previous witness; assertion that the great mass of the recommendations of the Council have been loyally adopted by the corporate bodies, *Wood* 3983. 3985-3989. 4141, 4142. 4147, 4148.

5. *Election of a Representative at the Medical Council:*

Explanation as to the mode by which the College of Surgeons elect a member to the Medical Council; that is, through the Council of the College, such Council being elected by the "fellows" or members who obtain a high educational grade, *Simon* 1167.

Constituency by which the representative of the College at the Medical Council is elected, *App.* 340.

6. *Number of Members and of Fellows of the College:*

There are about 10,000 members of the College, *Simon* 1167—Belief that the Fellows of the College are decreasing annually in number; there are about 1,000 at present, *Hart* 3835.

7. *Museum:*

Decided opinion that the State should support the Museum of the Royal College of Surgeons rather than that it should be maintained as at present by requiring every medical candidate to pay a fee of five guineas towards its support, *Turner* 3214-3216. 3296-3400.

8. *Fees:*

Nominal interest of the members of the Council of the College in the fees, *Sir J. Paget* 2391. 2501.

See also *Conjoint Scheme of Examination. Examinations. Medical Council. Qualifications.*

College of Surgeons (Ireland). Information in regard to the registration of Irish students; complaints made that some of the examinations of the Irish College of Surgeons which were stated to be preliminary were not in fact preliminary, but were allowed to take place after the commencement of the professional studentship, *Simon* 862-878. 1116-

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1118—Further reference to the imputations made against the College of Surgeons in Ireland in regard to laxity of preliminary examinations, *Simon* 1116–1118. 1268, 1269.

Examination in chemistry and materia medica in the College of Surgeons of Ireland, and also in jurisprudence, *Sir J. Paget* 2604–2606.

Reason for the College of Surgeons in Dublin not insisting on the registration of students, *Sir D. Corrigan* 2870—Question at issue between the Medical Council and the College of Surgeons of Ireland as regards men being allowed to go on with their studies in the College without any preparatory examination, *ib.* 2939–2942.

Constituency by which the representative of the College at the Medical Council is elected, *App.* 342.

Answers received from the College in 1877, upon questions proposed by the Executive Committee of the Medical Council in regard to the results of the professional examinations and the question of deficiency in preliminary education, *App.* 379, 380.

Analysis of the rejections (131 in number) in the period from 30th November 1874 to 11th December 1875, *App.* 380.

Communication from the College to the Medical Council, dated 7th December 1877, with further reference to the subject of preliminary education and examination, *App.* 400.

Communication in 1879 in reply to certain memorials from ophthalmic surgeons and the Obstetrical Society, *App.* 406.

Correspondence in 1879 relating to certain alleged irregularities in regard to preliminary examination prior to registration, in the case of the College of Surgeons of Ireland, *App.* 412, 413—Resolution adopted by the Medical Council, on 17th July 1879, in disapproval of the practice of the College of Surgeons in this matter, *ib.* 413, 414.

Colonies (Colonial Practitioners). Occasional consultation of the Medical Council by Government upon questions of foreign and colonial practitioners and of colonial medical legislation, *Acland* 90–92—Inconvenient effect of the conjoint scheme in regard to foreign and colonial students, *Turner* 3134–3139. 3230–3236.

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List of Indian and Colonial Universities whose examinations fulfil the conditions of the Medical Council as regards preliminary education, *App.* 389, 390.

Competition. System of constant competitive examination to which medical men are subject all through their career, *Sir J. Paget* 2350.

See also *Foreign Degrees and Practitioners.*

Compulsory Provisions. See *Conjoint Scheme of Examination*, 6. *Education*, 3. *Medical Council.* *Privy Council.*

CONJOINT SCHEME OF EXAMINATION:

1. *Action of the Medical Council in the Matter of a Conjoint Scheme for each Division of the United Kingdom; Conflict of Opinion at the Council on the Subject.*
2. *Advocacy of the Scheme, with Explanations as to the proposed Mode of Operation.*
3. *Objections to the Scheme.*
4. *Ireland; Prospect of Adoption of the Conjoint System.*
5. *Scotland; Difficulties raised as to the Introduction of the Scheme.*
6. *Necessity of Adoption in Scotland and Ireland as well as in England; Question as to compulsory Adoption.*
7. *Functions of the Medical Council if the Scheme be carried out.*

1. *Action of the Medical Council in the Matter of a Conjoint Scheme for each Division of the United Kingdom; Conflict of Opinion at the Council on the Subject;*

Long period for which the question of a combination of examinations in England has been under debate, all the details of a scheme for a conjoint board being practically settled, *Acland* 67–73—Difficulties in the way of final establishments of a conjoint English examination chiefly through the uncertainty as to the legislation on the subject, *ib.* 74–77.

Diversity of opinion in the Council upon the question of the conjoint scheme; majority of fourteen members in 1878 in favour of the scheme as against a minority of ten, *Acland* 163–169. 172, 173—The minority were all either Irish or Scotch representatives, *ib.* 168, 169—Large majority in 1870, when seventeen voted for the conjoint scheme, and only one against, *ib.* 170, 171.

Explanations with further reference to the reduced majority of the Council in favour of the conjoint scheme, *Acland* 253–262—Power of the Council to represent to the

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CONJOINT SCHEME OF EXAMINATION—continued.

1. *Action of the Medical Council in the Matter, &c.*—continued.

Privy Council the expediency of two or more examining bodies acting conjointly, there being no compulsory power to this effect, *Acland* 343-351.

Names of the Irish and Scotch members of the Medical Council who voted in favour of the conjoint scheme, *Simon* 583-591—Statement that the opinion of the Scotch representatives has considerably changed since the Bill of 1870; complete change of opinion on the part of Dr. Andrew Wood, *ib.* 609-612—Considerable difficulty experienced in the endeavour to reconcile the interests of the various bodies, the corporations, and the universities, *ib.* 779-781.

Opinion of the Council that a conjoint system of examination for each division of the kingdom is an essential object; the plan of the scheme for an English conjoint board and the regulations for carrying it out, are quite complete and might be put into operation at once, *Quain* 1284-1309. 1360-1367. 1375-1391.

Impression that the decreased majority of the Council in favour of conjoint examining boards is due to the action of the Scotch members, *Sir J. Paget* 2390.

2. *Advocacy of the Scheme, with Explanations as to the proposed Mode of Operation:*

System of committees by which it is proposed that the large number of examiners under the conjoint scheme shall work; proposed nomination of about one hundred examiners, of whom fifty would be selected to act, *Acland* 194-206—Explanation in reply to the objection that uniformity would not be secured in carrying out examinations by means of different committees, *ib.* 201-206.

Consideration of the question as to a conjoint board arriving at a minimum rather than a maximum examination; duty of the Council to carry out the requirements of the Act of Parliament as to the examination being sufficient, *Acland* 207-220—Advantage attached in England to a combination between the corporations and universities as furnishing different elements, *ib.* 239—Feeling in England for, and in Scotland against, the conjoint system, *ib.* 259.

Twofold grounds for a conjoint system, although the standard of education has been improving under the present system since 1858: difficulty as to a uniform standard of examination with a multiplicity of licensing bodies, *Acland* 267-269. 296—Object and effect of the conjoint scheme considered in connection with the objections raised of late years in Scotland and Ireland; dislike of the separate licensing bodies on the score of loss of independence as well as of fees, *ib.* 422-431. 475, 476.

Prospect of the most efficient examiners being secured under the conjoint scheme, *Acland* 508—Explanation that under the conjoint scheme for England only fifty examiners would act out of 100 to be nominated, *ib.* 547.

Favourable opinion of witness in regard to the adoption of a conjoint scheme; conclusion that a conjoint system of examination would have the effect of raising the standard of medical education, *Simon* 581-591. 608-712. 778-784. 791. 812, 813—Explanation that the conjoint scheme would be of indefinite duration, but that it would be expedient to revise the educational conditions annually, *ib.* 722, 723—Decided belief that the adoption of the scheme would tend to improve medical education in the interests of the public, *ib.* 772—In the proposed examinations there should be but one board in each division of the United Kingdom; proposal that these three divisional boards should be effectively supervised by the General Medical Council, *ib.* 905-909.

Further observations in favour of a conjoint scheme of examination with the object of raising the minimum standard for entrance into the profession; assertion that the proposed scheme is not a radical change in the sense of being revolutionary, but is a change which goes to the root of the present evil, *Simon* 933, 934. 948-954. 1065-1073. 1102-1111—Comparison of conjoint board examinations with the coining of an uniform sovereign at our Mint; argument that as there are colonial mints, so there should be a distinct section in the Register for duly authenticated practitioners, *ib.* 948-954.

Further examination regarding the favourable opinion held by the Medical Council of the conjoint scheme; principal aim of the Council in advocating the scheme to ensure efficiency and uniformity in the examinations, and in the different licensing bodies, *Simon* 1125-1129. 1135-1137. 1163. 1196-1203. 1228-1247. 1253-1267—Decided opinion that no examination, no matter how high its character, should have patent of exception from the conjoint board; the major titles conferred by universities and other medical bodies should never be given unless the minor examination of the conjoint board had been passed, *ib.* 1197-1203—Inducements which would exist for students to go up for the higher degrees after they had obtained a license from the conjoint board, *ib.* 1213-1218.

Approval of the conjoint scheme of examination by all the medical authorities in England with the exception of the College of Surgeons; postponement of the consideration of this question by the College of Surgeons until the result of legislation is known, *Quain* 1287-1290—Proposed method of examination by the conjoint board; assertion

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CONJOINT SCHEME OF EXAMINATION—continued.

2. *Advocacy of the Scheme, with Explanations, &c.*—continued.

assertion that the lowest examination as at the present time will be screwed up, and that the higher examinations for the honorary distinctions of the professions will not in any way be lowered, *Quain* 1307-1309.

Further observations in approval of adopting a scheme of conjoint examination; undoubted feeling in the profession in favour of the scheme, *Quain* 1430. 1450-1457. 1494-1498. 1500, 1501.

Evidence in detail in support of the proposition for a conjoint scheme of examination; decided opinion that a great boon would be conferred upon the public and upon the profession if such a scheme were passed without delay, *Waters* 1573 *et seq.*; 1736, 1737. 1765, 1766. 1804-1807. 1812. 1839-1852—General support in favour of the conjoint scheme received from the profession in England; feeling in respect of the scheme not so strong in Scotland and Ireland, *ib.* 1574. 1577. 1579. 1582.

Additional evidence in approval of the conjoint scheme of examination; expediency of permitting the universities to conduct the first two examinations, whilst the third and final examination should only be made by the conjoint board, *Waters* 1905-1912.

Qualified approval of the conjoint scheme as prescribed in the present Bill; belief that it would be a great improvement in the present system of examinations, *Glover* 2078, 2079. 2094-2096. 2116-2120. 2199—Necessity for the candidate who passes the conjoint board passing also through the portal of a corporation before obtaining a license, *ib.* 2108-2110.

Several grounds upon which witness advocates a conjoint examination for each division of the United Kingdom, *Sir J. Paget* 2268, 2269—Value of the conjoint scheme as a means of raising the standard of some of the examinations, though witness does not contend that men are often passed who are unfit to begin practice, *ib.* 2269-2277—Advantage anticipated if the Universities of England were joined with the corporations in one examining board, *ib.* 2406, 2407.

Explanation that every one passing the conjoint examination would receive the surgical, medical, and apothecaries' diplomas, *Sir J. Paget* 2462-2467—Proposed continuance of the preliminary examination under a conjoint scheme, *ib.* 2468-2470—Intention to have a first, second, and pass examination under the conjoint system; these examinations have been laid down and are adopted by the Bill, *ib.* 2469-2473—The first examination would take place at the end of the first year, *ib.* 2470.

Further objections to a State examination and licentiate, as compared with a conjoint scheme of examination, *Sir J. Paget* 2503-2510—Inclusion of the Universities in the scheme for England, *ib.* 2554, 2555—Anticipated operation of the conjoint scheme in causing an enlarged fitness of candidates from the individual corporations, and in leading to assimilation of the standards of examinations in the three kingdoms, *ib.* 2585-2591.

Approval of the Bill of 1878, as well as of the present Bill, witness attaching especial importance to a conjoint scheme, though there is a division in the Council on this question, *Sir J. Paget* 2635-2638. 2679-2685. 2697-2708.

Examination to the effect that, although the medical men of this country are, under the present system, more efficient than those of foreign countries, and though the licensing boards are doing their duty satisfactorily, a conjoint scheme is desirable, in order that the standards of examination may be still further raised, and that the lower may be brought to the level of the higher, *Sir J. Paget* 2679-2685. 2697-2706.

Explanation that the conjoint scheme would not necessarily take away from the several authorities their power of granting licenses, *Sir J. Paget* 2685-2696—Instances of the inequalities that would be remedied under a conjoint system, *ib.* 2749-2752.

Advantage which would follow to the students by the conjoint scheme in reducing the number of examinations; expediency of leaving to the Universities the preliminary examinations in scientific subjects, *Haughton* 3498, 3499.

Further evidence in favour of the conjoint scheme of examination; belief that under this system a considerable number of graduates would take higher degrees in their own universities than would be given by the conjoint board, *Haughton* 3576-3580. 3593. 3670, 3671. 3697-3703—Non-objection to the scheme in consequence of its having the effect of abolishing the weaker corporations, *ib.* 3580.

License to be given by the conjoint board conditionally upon the candidates getting a diploma from some corporate body, *Hart* 3818. 3820.

3. *Objections to the Scheme:*

Objection on several grounds to the proposal in the Government Bill for a conjoint scheme for each of the three kingdoms: the scheme is in fact neither practical nor practicable, *Sir D. Corrigan* 2761-2763. 2851-2859—Existence under the scheme of three portals of entrance to the profession, witness submitting that this would not be a lesser evil than the nineteen portals now in operation, *ib.* 2763-2769.

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CONJOINT SCHEME OF EXAMINATION—continued.

3. *Objections to the Scheme*—continued.

Change of medical opinion in the direction of a disapproval of the conjoint scheme, *Sir D. Corrigan* 2847-2850—Heterogeneous compounds mixed up in the scheme for three conjoint boards, *ib.* 2851.

Grounds for the conclusion that the effect of a conjoint scheme would be to establish a minimum qualification, *Sir D. Corrigan* 2859, 2880—Probable tendency under a conjoint scheme to a diminution in the number of persons identifying themselves with the various corporations represented at the Council, *ib.* 2884-2889.

Evidence in detail with regard to the proposed conjoint board scheme; contention that as regard University candidates the conjoint system is unnecessary as an education or an examination test, *Turner* 3116-3130, 3133-3139, 3151-3158, 3181-3187, 3196, 3200-3210, 3223-3229—Objection to the scheme in the interest not only of the medical bodies and the Universities, but also of the public and of the profession generally, *ib.* 3207.

Tendency on the part of young men to object to associate themselves with a corporation which would demand large fees, and which could be of no practical service to them; opinion that the Bill before the Committee would, if passed, lead to such a line of argument, *Turner* 3211-3217—Objection to the scheme on account of its tendency on the one hand to lower the standard of education, and on the other to affect the question from a money point of view, *ib.* 3223-3229.

Disapproval of the conjoint scheme, to the exclusion of the examinations at present conducted by the existing medical corporations; decided belief that if this scheme were passed a great many men who should pass the conjoint board would not go to an University to obtain a degree, *Wood* 4041-4049, 4055-4059, 4099-4103, 4150, 4151, 4169-4177, 4210, 4211—Approval of the scheme in so far as it should test the ultimate fitness of the candidate to practice; the duty of giving the necessary knowledge should, however, be left to the separate bodies, *ib.* 4977-4980.

4. *Ireland; Prospect of Adoption of the Conjoint System:*

Sanction given by the Medical Council to a combination of examining bodies in Ireland, this combination not being yet carried into effect, *Acland* 63-66, 239—Illustration in the case of Dublin of the expediency of a combination of different licensing bodies, *ib.* 268, 297—Belief that if England and Scotland were agreed, Ireland would not object, *ib.* 412, 487, 488.

Approval by the Dublin University of the conjoint scheme of examination; observations generally in favour of this scheme, *Haughton* 3488-3490, 3496-3501, 3548-3554, 3567—Necessity if the conjoint system is to be introduced into Ireland of making it compulsory, *ib.* 3500.

University degrees not to be conferred on the students in consequence of their passing the conjoint examination; absolute necessity for further examination in branches of medical science more suitable to the University graduate, *Haughton* 3501.

General concurrence of the Irish corporations in the proposed conjoint scheme, *Simon* 616.

5. *Scotland; Difficulties raised as to the Introduction of the Scheme:*

Recognition of the conjoint principle in Scotland though not completely carried out, *Acland* 298—Varying feeling in England, Ireland, and Scotland upon the question of a conjoint scheme, the objections coming mainly from the latter country, *ib.* 409-412, 424-428.

Explanation of the manner in which the Bill proposes to constitute the conjoint board for Scotland; opinion that the Scotch board should be in numbers proportionate to the weight and influence of the different electing bodies, *Simon* 613-617—Agreement of the various medical bodies in Scotland with the Universities in objecting to the scheme; principal objection of these bodies that the quality in all the examinations may be deteriorated, *ib.* 616, 617, 764-769—Opinion expressed by the Royal College of Surgeons of Edinburgh, that the proposed conjoint scheme of examination is a sweeping and fundamental change, and is neither necessary nor expedient, *ib.* 766.

Additional statement respecting the desire felt in Scotland to keep each of the Scotch portals open, as they at present exist; objections to the proposed legislation fully considered in two memorials, one on behalf of the Universities, and the other on behalf of the medical corporations of Scotland, *Simon* 839-848.

Absence of difficulty in overcoming the objections of the Scotch Universities to the conjoint scheme, *Quain* 1291-1296—Objection entertained to the conjoint scheme in Scotland, simply because it would be prejudicial to the Universities; strong feeling outside the corporations in favour of the scheme, *Waters* 1909-1912—Impression that the rivalry between the Universities and the medical corporations in Scotland partly accounts for the opposition to a conjoint board, *Sir J. Paget* 2452, 2453, 2556.

Unsuccessful

CONJOINT SCHEME OF EXAMINATION—continued.

5. *Scotland; Difficulties raised as to the Introduction of the Scheme*—continued.

Unsuccessful efforts made by Scotland to establish a one postal scheme; reasons for this system being considered unnecessary, *Turner* 3241-3245 — Evidence in regard to the inexpediency of establishing a conjoint scheme in Scotland; objection to this scheme on the ground that the number of subjects of examination is inferior to those in use in Edinburgh, *ib.* 3311-3322. 3353-3356. 3391. 3424. 3428-3430. 3435. 3436. 3428-3450.

Unanimous objection to the conjoint scheme expressed by the medical authorities in Scotland; grounds for believing that the scheme would lower the general standard of medical education and examination in that country, *Turner* 3313-3318 — Apprehension lest if a conjoint scheme were brought into operation students would satisfy themselves with its examination for the purposes of registration, and avoid the higher University examination; the result would be that there would be less perfectly educated medical men than there are at present, *ib.* 3317-3322.

Decided opinion that, if the conjoint system were adopted in Scotland, the medical bodies would not consent to a system which did not provide for the Board sitting and examining in each of the three principal University towns, *Turner* 3353, 3354 — Additional statement that the objection to a compulsory scheme is founded on the fear lest the standard of the University education should be lowered, *ib.* 3407-3414.

Greater difficulties which exist in Scotland than in Ireland, in regard to the conjoint scheme, *Haughton* 3701.

Numerous meetings held in Scotland to consider the expediency or otherwise of a conjoint scheme of examination; final result of these deliberations that it was determined to abandon that scheme and endeavour to improve the existing system, *Wood* 4049-4054.

Strong objection by the Colleges of Surgeons and Physicians as well as by the Universities in Scotland to the conjoint scheme; chief ground of objection that if adopted, the scheme would have the effect of lowering the University examinations to the level of that of the conjoint board, *Wood* 4066-4080.

6. *Necessity of Adoption in Scotland and Ireland as well as in England; Question as to Compulsory Adoption:*

Doubt as to the conjoint scheme being feasible save by means of Act of Parliament, *Acland* 509-514 — Decided opinion that in order to obtain concurrence in a joint scheme from all the three portions of the kingdom, it will be indispensable to resort to the compulsion of an Act of Parliament; contention that such a course is more in the interest of the public than the medical profession, *Simon* 711-715.

Inexpediency of a conjoint system being established for England, if a like scheme were not also adopted by Ireland and Scotland; probability in such cases that English candidates would go to that division of the kingdom where entrance to the medical profession would be easiest, *Simon* 784-786.

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DUBLIN UNIVERSITY (TRINITY COLLEGE):

1. *Details relative to the System of Medical Study and Examination, the Qualifications required, the Licenses and Degrees granted, &c.*
2. *Statistics on the foregoing Points.*
3. *Rejections at the Examinations.*
4. *Representation at the Medical Council.*
5. *Views of Trinity College upon the Subject of Medical Education and Examination, and of the Conjoint Scheme.*
6. *Resolution in favour of Direct Representation of the Profession at the Medical Council.*

1. *Details relative to the System of Medical Study and Examination, the Qualifications required, the Licenses and Degrees granted, &c.:*

Comment upon the system whereby, on payment of 5 s., a young man not being an undergraduate of Trinity College, Dublin, may be matriculated as a medical student without any examination, *Sir D. Corrigan* 2864-2867.

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EDINBURGH UNIVERSITY:

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2. *Medical Examinations, and Course of Study; high Standard of Qualifications required.*
3. *Rejections at the Examinations.*
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Great advantage which Edinburgh University possesses in the completeness of her library and museums; additional buildings in course of erection for the purposes of the museum, *Turner* 3371-3376—Vivisection experiments in connection with the physiological department, *ib.* 3377—Comparisons drawn between the examinations in Edinburgh and at the London University; written examinations in anatomy are more extensive in London, *ib.* 3388.

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Statement that there is no qualification in the kingdom to practise medicine higher than that of Edinburgh, *Haughton* 3582. 3612-3615.

3. *Rejections at the Examinations:*

Explanation in connection with the rejections at the Edinburgh University examinations in the year 1876, 1877, and 1878; re-appearance of the majority of the students who fail in the two first examinations, *Turner* 3073-3076—The rejections for the degree of doctor of medicine amount to eleven and a-half per cent.; argument from this fact that the production of a thesis is not a matter of form, *ib.* 3081.

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4. *Representation at the Medical Council:*

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5. *Official Communications from the University relative to Preliminary Education and Professional Examination:*

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6. *Effect of the proposed Bill as regards the University:*

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EDUCATION (COURSE OF MEDICAL STUDIES):

1. *State of Medical Education under the Act of 1858; Action of the Medical Council in the Matter.*
2. *Suggestions as to the adoption of various Improvements.*
3. *Question of Direct and Compulsory Interference on the part of the Medical Council.*
4. *Papers laid before the Committee showing in detail the Views of the Council and of the several Licensing Bodies.*

1. *State of Medical Education under the Act of 1858; Action of the Medical Council in the Matter:*

Explanation of the duties and action of the Medical Council, by means of regulating the examinations, in regard to medical education; particulars hereon as to the recommendations made and issued by the Council in different years since 1858, *Acland* 78-84—

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1. *State of Medical Education under the Act of 1858, &c.*—continued.

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2. *Suggestions as to the adoption of various Improvements:*

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Explanation that curricula of education can only exist in those institutions which are examining places, *Simon* 832—Suggestions as to what should form generally part of the preliminary education of medical men, *Waters* 1929-1934.

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3. *Question of Direct and Compulsory Interference on the part of the Medical Council:*

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Reasons further urged in support of the view that the curricula of the schools should not be controlled by the Medical Council, but by the several examining boards, *Sir J. Paget* 2485-2496—Grounds for the objection by the Medical Council of a proposal by witness for a visitation of the medical schools, *ib.* 2517, 2518.

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4. *Papers laid before the Committee showing in detail the Views of the Council and of the several Licensing Bodies:*

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Errington, Mr. (Member of the Committee). Preference expressed for Mr. Errington's Bill as providing for a State or test examination of candidates for appointments to hospitals, workhouses, &c., as leaving untouched the bulk of the profession and the licensing bodies, *Sir D. Corrigan* 2819-2825. 2843-2846. 2859-2862. 2878. 2925-2932—Sufficient protection for the public under Mr. Errington's Bill, together with free trade for those who can protect themselves, *ib.* 2843-2846.

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EXAMINATIONS (EXAMINING AND LICENSING BODIES):

1. *Generally as to the former and present Character of the Examinations.*
2. *Functions and Action, respectively, of the Medical Council and the Examining Bodies.*
3. *Suggestions for the Improvement of the present System.*
4. *Papers and Reports showing in detail the Views of the Medical Council and of the several Licensing Bodies.*
5. *Provisions in the Act of 1858.*
6. *List of Examining Bodies.*
7. *Returns as to Degrees, &c., Granted, and as to Candidates Rejected.*

1. *Generally as to the former and present Character of the Examinations :*

Important difference between the examinations, some aiming at a minimum standard, and others, such as the London University and Edinburgh University, aiming at a higher standard, *Acland* 40, 41. 214. 250—Improvement gradually effected in the examinations through the recommendations of the Medical Council, *ib.* 231, 232—Other considerations besides that of the examination by which persons are guided upon the question of entering the service, *ib.* 251, 252—Failure hitherto of the Council to secure a minimum or pass examination, *ib.* 510-512.

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Inequality, doubtless, of the examinations of different bodies, though none are so low as to pass men unsafe to begin the practice of medicine, *Sir J. Paget* 2723—Circumstance of the Council having never had occasion to report any examining body in default, *ib.* 2733, 2734.

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2. *Functions*

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EXAMINATIONS (EXAMINING AND LICENSING BODIES)—continued.

2 *Functions and Action, respectively, of the Medical Council and the Examining Bodies :*

Special importance of the duty of the Council as to superintendence of the examinations, these having been formerly very diverse in character, without any bond of union between the separate bodies, *Acland* 6. 29—Function of the Council to satisfy itself that the examinations are sufficient for the practice of the profession; no representation to the contrary has been made to the Privy Council, *ib.* 47, 48—Harmonious relations between the Medical council and the several licensing bodies, *ib.* 154—Control of the studies by the examinations, the latter being the instrument in the hands of the Council, *ib.* 238.

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4. *Papers and Reports showing in Detail the Views of the Medical Council, and of the several Licensing Bodies :*

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5. *Provisions in the Act of 1858 :*

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6. *List of Examining Bodies :*

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7. *Returns as to Degrees, &c., Granted, and as to Candidates Rejected :*

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Principal duties of the Council to superintend medical education and examinations, to form a register, and to issue the Pharmacopœia, *Quain* 1283—Explanation that the work of the Council is now limited to the examination and the indirect supervision of medical education, *Sir J. Paget* 2335. 2371.

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Mistaken ideas which are prevalent as to the duties which the Council should undertake; sanitary and poor law measures not the business of the Council, but of special departments of the Government, *Simon* 651-656. 660—Strong opinion that if the Medical Council had duties and questions imposed upon them in addition to their present duties, eminent men would not be able to afford time to attend; difficulty at the present time of getting through deliberative business, *ib.* 792-797.

Opinion that nothing has been done in the way of consolidating the several licensing bodies, for the reason that the powers of the Medical Council are directory and not mandatory; belief that if their powers were mandatory there would be no difficulty in dealing with the question, *Simon* 849, 850—Further statement that the Medical Council does not, unfortunately, possess coercive powers, but can only make recommendations to the several bodies; admission that the recommendations of the Council are generally accepted, *ib.* 875-877. 882-888. 894-904. 935-945.

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Medical Jurisprudence. Expediency of introducing medical jurisprudence as a subject for the consideration of the Medical Council, *Waters* 1757, 1758.

Medical Practitioners' Bill (1858). Memorandum prepared in 1858 by Mr. Simon, as medical officer of the then general board of health, in explanation of the Medical Practitioners' Bill, *App.* 305-310.

Medical Register. See *Register.*

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Medical Teachers' Association. Voluntary association formed by the medical teachers in London in the year 1868, to consider the desirability of having an amended curriculum; this body was designated the "Medical Teachers' Association," *Simon* 574-579, 806, 807—Winness held the position of president of the association during the first years of its constitution, *ib.* 576—Object of this association to consider the conditions of study imposed on the candidates for the medical profession in England; complaints made in the report of the association in regard to the incoherence and the multiformity of the regulations of the examining bodies, *ib.*

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Communications from the several licensing bodies to the Medical Council in 1879 with reference to the foregoing memorial and the amendments desirable as regards the study of, and the examination in, midwifery and obstetrics, *App.* 402-409.

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Miller, William John Clerk, B.A. (Analysis of his Evidence.)—Sundry papers and returns laid before the Committee by witness, as Registrar of the Medical Council, 2757; and *App.* 353-426.

[Second Examination.]—Return submitted containing a summary of the number and qualifications of persons added to the Medical Register from 1st January to 1st July 1879; 3023, 3024.

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Payment of travelling and hotel expenses, in addition to a fee of five guineas a day, in the case of seventeen members of the Medical Council who live out of London, 4214—Information, prepared by witness, showing in detail the cost of the Council and of its sittings; average expense of about 190 *l.* for each sitting, *ib.*—Reference to the last session of the Council as having cost 640 *l.*, and not 1,500 *l.*, as stated elsewhere, *ib.*

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Navy Medical Service. See *Army and Navy.* *Number of Practitioners.*

Number of Medical Men. Decrease in the number of medical men in England between 1851 and 1871, though the population had largely increased, *Acland* 217, 211.

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OXFORD UNIVERSITY:

Unwillingness of Oxford University to have an examination in surgery until the question of a conjoint board was settled; feeling of the University in favour of the conjoint scheme, *Acland* 50—Reference to the medical examination at Oxfrd as lower than the pass examination into the service, *ib.* 249, 250—Amicable settlement of a difficulty which arose on the first visitation by the Medical Council of the examination at Oxford University, *ib.* 313.

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Paget, Sir James, Bart., F.R.S. (Analysis of his Evidence.)—Has been a Member of the Medical Council for three years, being the representative of the College of Surgeons; he has been on the Council of the latter body for fourteen years, and has filled the office of President of the College, 2260-2267.

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1. *As to the Qualifications under the present System:*

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2. *As to the Amendments desirable:*

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2. As to the Amendments desirable—continued.

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1. *Particulars relative to the State of the Register, and the Action of the Medical Council, with a view to its Accuracy and Completeness.*
2. *Fees for Registration, and Cost of Register.*
3. *Powers and Action of the Council as to removing Names from the Register.*
4. *Effect of the proposed Bill as regards the Register.*

1. *Particulars relative to the State of the Register, and the Action of the Medical Council, with a view to its Accuracy and Completeness:*

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3. *Powers and Action of the Council as to removing Names from the Register:*

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SCOTLAND :

1. *Generally as to Medical Education and Examination in Scotland, and the Practice as to Degrees.*
2. *Combination of Medical Corporations.*
3. *Question of a Conjoint Examining Board for all Scotland.*
4. *Representation of the Scotch Universities at the Medical Council.*

1. *Generally as to Medical Education and Examination in Scotland, and the Practice as to Degrees :*

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W.

Waters, Edward, M.D., F.R.C.P.E. (Analysis of his Evidence.)—Is a physician in practice at Chester and consulting surgeon to the Chester Infirmary; has been connected for twenty-five years with the British Medical Association, 1505-1508.

Information generally with reference to the constitution of the association; the members of the Association comprise about one-third of all the registered practitioners, 1509-1537. 1555-1572. 1645. 1707—First annual meeting of the Association held in the year 1832; 1514—Arrangements under which the local meetings of the Association are held, 1520—The present number of members is nearly 8,000; steady increase in the number from year to year, 1523-1526—Explanation as to the constitution of the Council and of the committee of the Council; the total number of the committee is at present between fifty and sixty, 1529-1537.

Statement as to the objects for which the Association was specially formed; distinct aim of the Association in regard to the improvement of medical education, 1538-1554—Address read at an early meeting by Dr. Barlow on the subject of medical reform, 1538-1545—Subscription of one guinea by members, which entitles them to the journal of the Association, 1539—Formation in the year 1839, of a medical reform committee composed of members of the Association; reasons for the appointment of this committee, 1542-1544.

Reciprocity of practice one of the chief objects of the reform committee; advantages contemplated through reciprocity, 1546-1551—Formation of a Medical Council brought about by the Association, but not in the form which was then intended; direct representation of the profession embodied in the first request for a Medical Council, 1553. 1554.

Statement that though the medical profession consists of more surgeons than physicians the British Medical Association comprises all classes; the president has been more frequently a physician than a surgeon, 1555, 1556—Belief that at the present time the elite of the medical profession are members of the Association; large number of Scotch graduates who are members, 1556-1558.

Assertion that it is impossible to challenge the statement that the Association really represents the medical profession, 1560—Irish Medical Association formed upon the same lines as that of the British Medical Association; entire agreement of the Irish with the English Association in regard to the question of medical reform, 1566-1569.

Desire on the part of the British Medical Association for a conjoint system of examination; approval of the scheme which has been agreed upon in regard to medical education in England, 1573-1588. 1696-1700. 1703. 1706-1710. 1715-1718—General support in favour of the conjoint scheme received from the profession in England; feeling in respect of the scheme not so favourable in Scotland and Ireland, 1574. 1577. 1579. 1582.

Glaring disadvantage to the different towns and localities in England, that persons who could not get a diploma in one place were enabled to get it in another; belief that a number of persons of deficient attainments get into the medical profession through the facilities afforded by different examining boards, 1580, 1581—Opinion that the compulsory nature of the present Government Bill is owing, in a large measure, to the action of the British Medical Association, 1585—Overpowering vote of the constituents of the Association in favour of the conjoint scheme being compulsory, 1586-1588.

Strong approval by the Association of the principle of direct representation of the profession upon the Medical Council; large majority of votes also given in favour of this question by the profession at large, 1589-1599. 1635-1646. 1682-1694. 1701-1706. 1718—Opinion that the corporations have an undue amount of representation on the Council; argument that their representatives are more interested in questions regarding the special bodies than in those of the general profession, 1592. 1594-1598.

Information

Waters, Richard, M.D., F.R.C.P.E. (Analysis of his Evidence)—*continued.*

Information generally as to the defects in the present constitution of the Council; neglect by that body of the complaints as to the great ignorance of candidates in general education, 1599-1606. 1767-1777. 1808-1811. 1854, 1855—Examples of cases in which the general education of medical candidates has been found to be largely deficient; opinion expressed by an examiner of the College of Surgeons that the spelling of candidates was atrocious, 1607-1626. 1724-1735. 1863, 1864.

Strong disapproval of the licensing bodies examining the candidates for the preliminary examinations; contention that the fault lies with the Medical Council for not insisting that the education be improved, 1615-1617. 1623-1626. 1679-1681—Enormous amount of money which has been spent upon the "Pharmacopœia" by the Medical Council; opinion that this work has not been kept up to the requirements of the day, 1629. 1677, 1678.

Examination in regard to the special duties which should be undertaken by the Medical Council; conclusion that their primary duty is to promote the education of the general medical practitioners, 1630. 1665-1695. 1745-1747. 1752-1766—Neglect of the Council in regard to the education of vaccinators, 1630—Expediency of there being some body which should advise the Government on medical questions; importance that such a body should be one representing collective professional opinion, 1631-1634—Decided opinion that the interests of the profession are in no wise separate from the interests of the public, 1635, 1636.

Memorial presented to the Medical Council by members of the medical profession in favour of direct representation; a similar memorial also addressed to Her Majesty's Government in the year 1869; 1640, 1641—Suggestions as to the mode which should be adopted for the election of medical representatives to the Council, 1643-1646. 1653-1660.

Explanation of the extent to which direct representation is adopted in the election of members to the British Medical Association, 1647-1652. 1664—Strong opinion that, under a system of direct representation, professional agitators would not have the remotest chance of election to the Council; belief, on the contrary, that the more eminent men of the profession would still be elected, 1660, 1661—Inexpediency of giving dentists, who are not surgeons or physicians, the privilege of representation on the Council, 1662, 1663.

Examination as to the power which the Council should have for the punishment of professional offences; desirability of power to remove from the Register any person whose conduct is discreditable to the profession, 1669-1676. 1681-1693—Belief that in regard to striking men off the Register greater confidence would be reposed in the Council if there were representatives of the profession on it, 1681—Necessity for the Council possessing a larger amount of disciplinary control over the profession, especially in regard to quack advertisers, 1682-1692.

Conviction that a conjoint scheme will never be adopted unless it is made compulsory by Act of Parliament, 1703—Assertion that the British Medical Association has always endeavoured to work with, and not in opposition to, the Medical Council, 1704, 1705.

Explanation of the course taken by the Association in regard to the rejection of the Bill of 1870; circumstances under which that body was pledged to support no Bill that did not contain a clause providing for direct representation, 1711-1714. 1778-1784—Advisability of legislation on the subject of medical reform being considered as a whole, and not carried out piecemeal, 1715, 1716.

Belief that it will be difficult to pass any Bill which does not provide for direct representation of the profession, 1718. 1785, 1786—Inexpediency of decreasing, to any great extent, the present numbers on the Council; explanation that the present number facilitates the appointment of committees, by which means a large amount of work is transacted, 1719-1721—Statement that, if a compulsory conjoint scheme were adopted, there would be no injury suffered by individual corporations in consequence of loss of fees, 1722, 1723.

Further observations in support of the proposition to adopt a conjoint scheme of examination; decided opinion that a great boon would be conferred upon the public and upon the profession, if such a scheme were passed without delay, 1736, 1737. 1765, 1766. 1804-1807. 1812. 1839-1852.

Additional evidence in support of direct representation of the profession on the General Council; reference hereon to the part taken by the British Medical Association in connection with Bills brought into Parliament, without any clause providing for direct representation, 1738-1744. 1748-1751. 1762-1764. 1778-1786. 1805-1807.

Disapproval of the introduction of general topics of discussion at the meetings of the Council; expediency of limiting the speeches to a certain time, 1745-1747. 1752-1761. 1763-1765—Expediency of introducing medical jurisprudence as a subject for discussion at the Council, 1757, 1758.

Considerable improvement which has taken place in general education within the last

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Waters, Richard, M.D., F.R.C.P.E. (Analysis of his Evidence)—*continued.*

ten years; assertion, however, that medical education has not kept pace with the general march of education, 1770, 1771—Admission that the Medical Council, though it has not done all that was expected of it in regard to education, has aimed at doing good, and has done good, 1774.

Further information regarding the petitions presented by the medical profession in favour of direct representation; claim of one-third of the profession to have voted in favour of this question, 1787-1803—Additional statement that the administrative power of the Council is insufficient; opinion that a scheme of education should be originated and the rules laid down by the Council, 1833-1838. 1856-1862.

Second Examination.]—Further examination as to the possible advantage of direct representation in fitting the Medical Council to enter more into questions of medical policy than they now do; opinion expressed by some of the most eminent members of the Council in favour of the representation of the profession, 1865-1874. 1885-1890. 1893-1895. 1901, 1902—Belief that when the question of conjoint examination is settled there will remain comparatively little for the Council to do except the visitation of examinations; opportunity in this way for the Council to consider matters of great public interest, 1868, 1869. 1900. 1940, 1941.

Contention that, under a system of direct representation, representatives of the profession would bring most important knowledge as well as influence to bear on the question of medical education; unanimity in the whole profession in regard to the importance of improving medical education, 1870—One of the chief objects in advocating direct representation is, that greater pressure should be put upon those licensing bodies who pass candidates on too slight qualifications, 1871.

Further assertion that though there is a certain improvement in medical education, the improvement is not *pari passu* with the improvement that has taken place in education generally, 1873—Circulars issued by the British Medical Association upon the last occasion of the canvass of the profession in relation to the conjoint scheme and to the question of direct representation, 1875.

Explanation of the mode of election of representatives to the Council of the British Medical Association, 1876—Predominance at the present time of the interests of the corporations over those of the profession or the public in the Medical Council; necessity for professional representation in order to temper this domination of interests, 1876. 1922-1927. 1945—Information respecting the Bills introduced into Parliament at the instigation of the British Medical Association; contradiction of the statement that the Association used personal interest to defeat the Bill of 1870, in consequence of its not enjoining direct representation of the profession, 1877-1884. 1892. 1946.

Absence of antagonistic feeling on the part of the Association towards the Medical Council in regard to the question of medical reform, 1883, 1884—Large proportion of the medical profession throughout the country which is represented by the Association in the action which it has taken in the matter now before the Committee, 1891—Strong contradiction of the statement that the signatures to the several petitions in favour of this object were obtained by the Association from the profession under pressure, 1896-1898. 1943, 1944.

Resolution passed in favour of direct representation by Trinity College, Dublin, 1899—Decided approval of direct representation expressed by the medical press of both England and Ireland, 1903, 1904.

Additional evidence in approval of the conjoint scheme of examination; expediency of permitting the Universities to conduct the first two examinations, whilst the third and final examination should only be made by the conjoint board, 1905-1912—Objection entertained to the conjoint scheme in Scotland, simply because it would be prejudicial to the Universities; strong feeling outside the corporations in Scotland in favour of the scheme, 1909-1912—Great importance of making midwifery a principal subject in the education of a general practitioner, 1913-1915. 1933.

Certain amount of interference of the duties of chairman of the British Medical Association with witness' own practice, 1919-1921—Evidence in further relation to the advantage which would result from direct representation of the profession at the Medical Council, 1922-1927. 1945. 1947-1951.

Additional observations in regard to the effect which the action of the Council has had generally on medical education, 1928-1935—Neglect by the Council of their duty as to visitation of examinations in the last five years, 1929—Suggestions as to what should form generally part of the preliminary education of medical men, 1929-1934.

Necessity for giving the Medical Council power to deal with the question of purging the register from improper persons, 1936-1939—Advantage which would accrue from having members on the Council who are acquainted with poor law and sanitary medical knowledge, 1942.

Women (Lady Doctors). Explanation that the clause in the Bill for compulsory affiliation is principally intended to govern the admission of women into the medical profession,

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Women (Lady Doctors)—continued.

Simon 1088, 1089—Conditions under which women may pass on to the Medical Register without going through a corporation, but not without undergoing an examination, *ib.* 1261-1263.

Circumstances under which the Medical Council has consented to admit women to the register; strong objection of the English College of Physicians to the admission of women, *Quain* 1342-1350. 1449. 1458-1461—Expediency of dealing with the entrance of women into the medical profession in a different way to the entrance of men, *Haughton* 3503. 3507.

Wood, Andrew, M.D. (Analysis of his Evidence.)—Experience of witness as member of the Medical Council from the beginning, he being the representative of the College of Surgeons of Edinburgh; he has been in practice at Edinburgh as a family practitioner for forty-five years, 3952-3956. 3974.

Unsatisfactory state of the medical profession anterior to the passing of the Medical Act; grounds upon which this opinion is founded, 3957, 3958—Preliminary examination in general education first instituted by the Edinburgh College of Surgeons long before the passing of the Act; remarkable success which attended this arrangement, 3957, 3958.

Injurious effects of the former absence of a published register of qualified practitioners; monopolies of practice which existed in the absence of a register, 3959-3961—Chief objects which were aimed at by the promoters of the Medical Act; the principal object was to remove all restrictions from duly qualified men as to the right to practise throughout the three kingdoms, 3962-3965.

Information as to the beneficial character of the Act; unfortunate blunder caused by the enacting of Clause 31, which did not provide for a complete qualification in medicine, surgery, and midwifery, 3966-3968. 3999. 4178-4182—Decided opinion that every medical practitioner should be qualified in midwifery as well as in medicine and surgery, 3967, 3968—Valuable operation of the system of combined boards which have been in existence in Scotland for twenty years; object of these boards to enable students to obtain a double qualification at a less expense, 3969-3973.

Examination in regard to the history of the Medical Council; formation of a code of education and examination which, though altered and amended, is still in existence and force at the present day, 3974-3989. 3999-4001. 4183-4191. 4204-4206—Indignant denial of a statement made by a former witness that the committees of the Council only worked so long as the funds in their possession lasted; explanation of the actual state of matters in regard to the finances of the Council, 3974. 4189-4191—Assertion that the business committee of the Council does not receive any payment for the duties which it performs, 3974.

Great improvement in the Army and Navy Medical Service, which has been brought about by the action of the Council, 3979, 3980—Opinion that the Council has power to enforce its recommendations in any matter which is material; this power exercised only by means of representations to the Privy Council, 3981-3989. 4141-4149.

Explanation of the reasons which caused a certain difference between the Council and the College of Surgeons, alluded to by a previous witness; assertion that the great mass of the recommendations of the Council have been loyally adopted by the corporate bodies, 3983. 3985-3989. 4141, 4142. 4147, 4148.

Excellent effect produced by the visitations of the Council; misfortune that for certain reasons these visitations have been for the present discontinued, 3990-3997. 4041—Expediency of reducing the amount of fees paid to the members of the Council for daily attendance from 5 *l.* 5 *s.* to 3 *l.* 3 *s.*; 3997, 3998.

Explanation of the action of the Council in regard to the adoption of preliminary examinations by the education corporations; recommendation by the Council that the subject of general education should be remitted entirely to these bodies, 4002-4005—Establishment by the Council of a register of medical students which extends to the three kingdoms; satisfactory character of that required by the College of Surgeons in Edinburgh, 4004, 4005. 4136, 4137.

Immense improvement which has been effected in the curriculum of medical study; great importance of paying more attention than is done at present to the study of midwifery, 4006-4010. 4119-4133—Larger extent of the present examinations than they used to be; belief that if the present standard were much raised there would be considerable difficulty in supplying the country with medical men, 4011, 4012. 4018-4021. 4098.

Important competition for the degree of Fellow in the Colleges of Surgeons and Physicians in Edinburgh; distinguished men only elected to this degree, by means of a ballot, as in a club, 4013-4017. 4108-4115. 4158-4163—Statement that the system of clinical examination has now become universal in Scotland, 4019—Excellent character of the general body of medical practitioners in the country districts of Scotland at the present time; belief that they are fully equal to the general run of practitioners in any country in the world, 4022-4025.

Wood, Andrew, M.D. (Analysis of his Evidence)—continued.

Emphatic denial that any of the Scottish medical corporations offer their licenses on easier terms than in any other part of the kingdom, with the object of attracting candidates; there is no such thing as passing for the single or double qualifications of the Colleges of Surgeons and Physicians in Edinburgh without a full examination, 4026-4035. 4104-4107—Contention that the reason of so many other students than Scotchmen, coming to the Scotch schools, is that the education is known to be of such a high character; advantage also to English and Irish students that they get a double qualification in Scotland at a lesser cost than in their own countries, 4029-4035—Numerous rejections amongst those students who do come to Scotland with the hope of obtaining easier examinations, 4035.

Encouraging view taken by witness of the present state of the medical profession; opinion, that with a slight modification of the Medical Act, there would be left very little to complain of, 4036, 4037—Opinion that the chief improvement required is, that there should be a double instead of a single qualification; a single qualification should give no right to be placed on the register, 4038-4040.

Disapproval of adopting the conjoint scheme to the exclusion of the examinations at present conducted by the existing medical corporations; decided belief that if this scheme were passed, a great many men who should pass the conjoint board would not go to an university to obtain a degree, 4041-4049. 4055-4059. 4099-4103, 4150, 4151. 4169-4177. 4210, 4211—Numerous meetings held in Scotland to consider the expediency or otherwise of a conjoint scheme of examination; final result of these deliberations that it was determined to abandon that scheme and endeavour to improve the existing system, 4049-4054.

Opinion that an uniportal examination would be quite impracticable; grounds for this view, 4060-4065—Strong objection by the Colleges of Surgeons and Physicians as well as by the Universities in Scotland, to the conjoint scheme; chief ground of objection that if adopted, the scheme would have the effect of lowering the University examinations to the level of that of the conjoint board, 4066-4080.

Approval of the scheme in so far as it should test the ultimate fitness of the candidate to practise; the duty of giving the necessary knowledge should, however, be left to the separate bodies, 4077-4080—Favourable opinion of the present constitution of the Medical Council; independent character of the members, 4081-4085.

Expediency of adopting direct representation in regard to the election of members to the Council; desirability of there being more of the class of general practitioners on the Council, 4086-4097—Advisability of increasing the number of the Council by four or six new representatives, 4097—Expediency of increasing rather than restricting the purview of the examinations in regard to subjects of a special nature, such as lunacy; necessity for doing this by degrees and not suddenly, 4126-4133.

Great advantage which results to the students from class examination which is at present voluntary; approval of this system of examination being made compulsory in every corporation, 4134, 4135. 4137—Importance of the existence of a check upon the teaching operations of every school in the kingdom; check upon the capacity for teaching of the lecturers in the Edinburgh School, 4137-4140—Belief that the increasing number of the rejections by the examining boards is caused by the increased standard of examinations, 4152-4157.

Explanation of the reasons for the change of opinion by witness and the other Scotch representatives in regard to medical reforms, between the years 1870 and 1878; 4164-4167—Great advantage resulting from the influence of the medical corporations over the profession generally, 4172, 4173—Expediency of giving the Medical Council greater powers than they possess at the present time; disapproval, however, of such powers as proposed to be given in the Government Bill, 4186-4188.

Further observations in favour of direct representation of the profession on the Medical Council; opinion that more confidence would be felt in the Council if there were a greater infusion of general practitioners, 4191-4195—Considerable advance, of late years, in medical science; belief that in this respect England is quite equal to any other country, 4196-4201.

Practical character of the medical examinations as at present conducted; difficulty for a candidate to obtain sufficient knowledge for an examination by means of cramming, 4202, 4203—Further observations regarding the practice of admitting fellows to the College of Surgeons in Edinburgh without examination; belief that the College of Physicians and Surgeons in London also admit fellows under certain conditions, 4207-4209.

Workhouses. See Hospitals and Workhouses.